

# FINAL REPORT

## Network for a Healthy California 2012 Tracking Survey

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## Chapter 1: Executive Summary

This report presents findings from the *Network for a Healthy California* 2012 Tracking Survey. Interviews were conducted with 1,026 CalFresh recipient mothers and 993 CalFresh eligible mothers. Data were collected through a combination of telephone and in-person interviews in the fall of 2012.

### Key Findings

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Key findings from the 2012 study are highlighted below.

#### Advertising Recall

After a one year spending hiatus, 2012 advertisement spending exceeded spending for all other years. As expected, 2012 aided recall is higher than in prior years across both audience types and for all media (i.e., TV, radio, billboards). This trend holds across all 2012 advertisement weight tiers, race/ethnic groups, and with English-speaking and Spanish-speaking respondents.

#### Audience Reactions to Advertising Campaign

With higher advertising exposure in 2012, there was concern about advertising fatigue among the target audience. Questions were added to the survey to inquire about audience reactions to the advertisements. When respondents expressed a positive or negative opinion, they were asked to explain why they felt that way. Audience reactions to the advertisements were overwhelmingly positive, although more positive among CalFresh recipient mothers (89%) than CalFresh eligible mothers (62%). Most commonly cited reactions among respondents were that the ads promoted healthy eating and that the ads empowered them to make their homes and communities healthier places.

#### CalFresh and *Network for a Healthy California* Recall

*Network for a Healthy California, Champions for Change* brand awareness increased among CalFresh recipient mothers between 2011 and 2012 (from 38% to 45%); awareness remained unchanged among CalFresh eligible mothers (approximately 33%). Aided recall of the CalFresh program name was high among recipients already enrolled in the CalFresh program (87%) while it was, as expected, lower among CalFresh eligible mothers (62%). Awareness that CalFresh is the new name for the Food Stamp program was high among recipients (94%) and CalFresh eligible mothers (71%).

## Exposure to Community Interventions

*Network* efforts in 2012 also included community interventions to promote healthy eating and physical activity. These interventions were diverse in scope, including classes, food demonstrations, health fairs and the dissemination of printed informational materials. Penetration of community interventions increased among CalFresh recipient mothers from 84% in 2011 to 89% in 2012. Exposure to community interventions decreased among CalFresh eligible mothers—from 65% in 2011 to 58% in 2012.

## Exposure to Workplace Interventions

We observed significant increases in access to workplace nutrition and physical activity benefits, approaching one-in-five in 2012 among both CalFresh recipient and eligible mothers from about one-in-ten in previous years. Among those with access to workplace benefits, use levels remained high in 2012 among both recipient and eligible mothers—at 70% to 80% for nutrition benefits and approximately 60% for physical activity benefits. Increases in access to workplace benefits and persistent high levels of use of benefits translated to a higher number of people participating in nutrition and physical activity benefits overall.

## Outcomes Analysis

We completed additional analyses in 2012 to investigate the impact of campaign exposure on ten intended outcomes:

- *Self-efficacy beliefs* (personal physical activity, personal fruit and vegetable consumption, family physical activity changes, family fruit and vegetable changes),
- *Normative beliefs* (normative physical activity beliefs, normative fruit and vegetable consumption beliefs), and
- *Behaviors* (personal physical activity, personal fruit and vegetable consumption, physical activity-related family changes and fruit and vegetable consumption-related family changes).

We found additional evidence in 2012 that ad exposure and exposure to community interventions were associated with positive outcomes. Respondents who reported high ad recall and higher levels of exposure to community interventions reported positive outcomes on self-efficacy for personal fruit and vegetable consumption and normative beliefs for family change related to physical activity. Respondents with high recall alone had associations with self-efficacy for family changes that support fruit and vegetable consumption and for actual personal fruit and vegetable consumption behavior.

## **Knowledge of Recommendations**

We observed a significant increase in knowledge of the recommended level of fruit and vegetable consumption among CalFresh recipient mothers between 2011 and 2012. In contrast, CalFresh eligible and recipient mothers generally overestimated the amount of weekly physical activity needed for themselves and their children. There was broad agreement from recipient and eligible mothers that physical activity and fruit and vegetable consumption reduces the risk of developing chronic diseases.

## **Social Normative Beliefs**

The only changes in social normative beliefs observed in either audience between 2011 and 2012 was a significant increase from 30% to 37% in perception that most or all other people eat enough fruit and vegetables every day among CalFresh recipient mothers. In the 2011 study there was no change among CalFresh eligible mothers but increases among CalFresh recipient mothers on many of the measures.

With few significant findings between years, and with only around a third of respondents stating that most or all of their peers are performing healthy behaviors, the results suggest that we have a long way to go to shift the normative environment. The strategy for the next phase of the campaign is to focus on changing the perception of the normative environment. These measures will be critical to track over time in order to assess the effectiveness of the next phase of the campaign.

## **Self-Efficacy Beliefs**

We observed significant positive movement on self-efficacy beliefs among CalFresh recipient mothers. Just over a majority (51%) now report high self-efficacy related to increasing personal fruit and vegetable consumption and ability to set aside time for physical activity compared to in 2011 (44%). Approximately 82% of CalFresh recipient mothers also now report high-self efficacy related to increasing healthy eating in the family in 2012 compared to 72% in 2011. CalFresh recipients showed a significant increase in self-efficacy to make time for physical activity in 2012 (54%) compared to 2011 (41%). The results echo the pattern of improvement among CalFresh recipient mothers observed in 2011 with no change among CalFresh eligible mothers and provide growing evidence of disparities between the audiences.

## **Personal Behaviors**

The recommendation for fruit and vegetable consumption was “5-a-day” from 2004-2006, 3.5-5 cups per day from 2007-2010, and half plate per day in 2011 and 2012. We tracked the progress of respondents on all three measures in 2012 and observed no significant change in the percent of CalFresh recipient mothers meeting the “5-a-day” or cups recommendation. There was a slight decline in CalFresh eligible mothers meeting the cups recommendation (down from 42% to 36%). Over half of CalFresh recipient



mothers reported meeting the half plate recommendation in 2012 compared with only 38% of CalFresh eligible mothers.

With regard to physical activity, significantly more CalFresh recipient mothers reported meeting the recommendation, both in terms of the old “5-days-a-week” physical activity measure (up from 42% to 51%) and the more recent 150 minute per week measure (up from 53% to 59%). The majority of CalFresh recipient mothers are now meeting the recommendation. No change was observed among CalFresh eligible mothers on the 150 minute per week measure; a decline was observed on the “5-days-a-week” measure from 41% to 37%. No changes were noted on measures related to physical activity during work time.

### **Family Change Behaviors**

Significantly fewer CalFresh eligible mothers reported participation in family change behaviors in 2012 compared to 2011 with significant decreases for several behaviors including making it easy for children to eat fruit and vegetables, setting limits on sugary beverages in the home, replacing sugary drinks at meals and snacks, making it easy to drink water, making it easy for children to be physically active and by doing physical activity with their children. For the most part, the percent of CalFresh recipient mothers partaking in family change behaviors remained constant in 2012. On almost all of the family change behavior measures, CalFresh recipient mothers outperformed CalFresh eligible mothers, a pattern also noted in 2011.

### **Use of the Internet and Social Networking Sites**

We observed significant increases since 2011 in internet access (over 80%) and use of social networking sites (70%) for both audiences. The majority of both audiences report use of smart phones (60% of eligibles and 56% of recipients) with significant increases for both, increases in the range of about 10 percentage points.

### **Race/Ethnic Differences**

We found a number of differences based on race/ethnicity in the 2012 data. In terms of ad recall, recipient mothers in all race/ethnic groups reported significantly higher recall since 2011 with African Americans showing the highest recall. In comparison to Whites, aided recall for all ad types was significantly higher for both African American and Hispanic recipient mothers in 2012.

While Hispanic recipient mothers outperformed Whites in terms of recall, Hispanic eligible and recipient mothers reported significantly lower rates of social normative support than Whites in 2012. Hispanic



recipient mothers also felt less highly efficacious as compared to Whites on measures of personal fruit and vegetable consumption, physical activity and healthy eating family change behaviors.

In contrast to normative and self-efficacy beliefs, Hispanic recipient mothers showed strong results on measures of personal fruit and vegetable consumption and physical activity. Hispanic recipients reported significantly higher levels of fruit and vegetable consumption than their White counterparts in 2012. They also reported significantly higher rates since 2011 in physical activity.

Regarding family change behaviors, CalFresh recipient and eligible mothers of all race/ethnic groups reported very high rates of participation with Hispanic mothers scoring significantly lower than Whites on some items in 2012.

### **Chronic Disease Risk and Overweight Status Differences on Outcome Measures**

In the 2012 survey, we included questions about personal and family risk of chronic disease. Respondents were categorized as “high risk” if they responded affirmatively that they, or anyone in their immediate family, had ever been told they have type-2 diabetes, heart disease, or high blood pressure. The questionnaire also included self-reported height and weight questions, which we used to calculate BMI. Respondents were identified as overweight if their calculated BMI met or exceeded 25.0, in accordance with CDC guidelines. We analyzed key measures for differences by high chronic disease risk or overweight status and found that both groups are more likely than their counterparts to report *Network* and CalFresh ad recall and exposure to community interventions. Generally, however, we did not observe relationships between disease risk or weight status and the vast majority of outcome measures.

## Chapter 2: Study Objectives and Methodology

In order to assess the effectiveness of the *Network's* social marketing campaign promoting healthy eating and physical activity, a series of annual audience surveys has been implemented since 2004. The surveys have tracked changes in campaign exposure and trends with regard to knowledge as well as attitudinal and behavioral outcomes. This report represents data from the 2012 study, the ninth in this series.

### Study Objectives

The specific objectives of the 2012 survey were to:

- Assess rate of recall of recent campaign advertising messages,
- Assess audience exposure to other *Network* materials and community interventions promoting healthy eating and physical activity,
- Assess trends related to knowledge about healthy eating and physical activity,
- Assess trends in self-efficacy, social normative and other beliefs relative to healthy eating and physical activity behaviors,
- Assess trends in eating, physical activity, and family behaviors, and
- Explore the relationship between campaign exposure and knowledge, beliefs, and behavioral outcomes.

### Methodology

#### Study Populations

This year's survey included two study populations: California CalFresh recipient mothers (recipients) and mothers who are not CalFresh recipients but are eligible for the Food Stamp program (eligibles). All participants were mothers 18-54 years of age with at least one child aged 0-17 and incomes less than 130% FPL. These populations comprise the main target audiences of the *Network* campaign.

Prior to 2011, the CalFresh program was known as the Food Stamp program. The survey populations have changed somewhat over the course of the annual studies:

#### *2004 Study*

The first study entailed four samples: current CalFresh recipients (males as well as females); low-income mothers (LIM) of children aged 0-14; Californian 9-11 year olds from

low-income families and the general adult population of the State (both male as well as female). For the LIM and children's samples respondents were required to be from families with annual incomes at or below 185% of the Federal Poverty Level (FPL).

#### *2005 Study*

In 2005, it was decided to limit the adult study populations to mothers (aged 18-54) of children under the age of 18. Therefore, in 2005, the year of the first tracking study, the three adult study populations were mothers (aged 18-54) of children aged 0-17 currently participating in the CalFresh, low-income mothers (LIM) eligible for CalFresh but not enrolled in the program and mothers in the general population. The sample of 9- to 11-year-olds from low-income families remained unchanged. The definition of low-income also remained the same (185% of the Federal Poverty Level). Given the change in the definition of the 2005 study populations, the 2004 adult data were reconfigured to include mothers only for trend analysis purposes. Males and any females who were not mothers were separated out.

#### *2006 Study*

In 2006, U.S. Department of Agriculture (USDA) funding guidelines regarding surveys dictated a further change to the composition of the samples. The guidelines limited funding of surveys to populations who meet CalFresh eligibility criteria, namely those with annual household incomes at or below 130% FPL. This had no impact on funding for the CalFresh recipient sample. However, the general population sample had to be eliminated and the income eligibility criterion was reduced from 185% of FPL to 130% of FPL for the low-income mothers and children samples. As a result, readers should be cautious in interpreting trend data for these audiences. While funds from other sources were found to augment the main sample of mothers with approximately 300 mothers at higher incomes (130%-185% of FPL), the 2006 sample is predominantly made up of the lowest-income mothers.

Commencing in 2006, the non-CalFresh-recipient adult study populations were relabeled. Those mothers at/below 130% FPL who were not recipients were labeled as *CalFresh eligibles*. Those mothers in the higher 130-185% FPL group were labeled as *low-income mothers (LIM)*. We have carried forward these monikers in subsequent years.

### *2007 Study*

In 2007, additional funds were found to augment the study samples. The 2007 study comprised four adult populations: a) CalFresh recipient mothers, b) CalFresh eligible mothers (at/below 130% FPL), c) LIM (between 130% and 185% FPL), and d) higher-income mothers (at/above 185% FPL). Also, since previous studies indicated a relationship between CalFresh participation and campaign outcomes, we decided to exclude program participants from the other low-income adult samples. For trend analysis purposes, the earlier year's samples were reanalyzed in order to exclude any CalFresh recipients included within them.

### *2008 Study*

In 2008, only two populations were included in the study: CalFresh recipient mothers and CalFresh eligible mothers. No survey was conducted with LIM due to resource constraints. In addition, there was no comparison population of higher-income mothers (also because of funding limitations) and no sample of low-income 9-11 year olds because of a hiatus in communication efforts targeted to them.

### *2009 Study*

In 2009, sufficient resources were available to reinstate all of the (adult) samples: CalFresh recipient mothers, CalFresh eligible mothers, low-income mothers (LIM), and higher-income mothers (at/above 185% FPL).

### *2010 Study*

The 2010 study surveyed the same populations as the 2009 study.

### *2011 Study*

The 2011 study surveyed the same populations as the 2009 and 2010 studies.

### *2012 Study*

The 2012 study surveyed CalFresh recipients and CalFresh eligible mothers only; the study did not include the low-income mothers (LIM) population (FPL between 130% and 180%) or the comparison group of higher-income mothers (at/above 185% FPL).

## Data Collection

In 2012, we collected data using both computer-assisted telephone interviewing (CATI) and public location intercept methods. CalFresh recipient data was collected using CATI. The *Network* provided the CalFresh recipient sample of current program participants.<sup>1</sup> CalFresh eligible mothers were selected using a public location intercept method. Eligibles were recruited and interviewed in shopping malls frequented by sizeable numbers of low income people. This method was also used for data collection in prior years of the study.

In 2004, we used a *Network* supplied list for the CATI sample of CalFresh recipients, one that included both men and women. In subsequent years the list was of mothers only. Since the incidence of qualified respondents was generally high each year, it was cost-effective to collect data by telephone. In 2005, 996 interviews were completed by phone with CalFresh recipients. For the 2006-2011 studies, 1,000 interviews were completed and 1,026 interviews were completed in 2012.

Unfortunately, there is no cost-effective approach for sampling the other populations on a household basis, so the decision was made in 2004 to survey these populations through face-to-face interviews in shopping malls and other venues where low-income parents congregate. While we are conscious of the shortcomings of the intercept design (*e.g.*, the inability to formally generalize findings to the populations being studied), budget and efficiency concerns took precedence.

A total of 1,000 adult interviews and 400 child interviews were completed in malls in 2004 and 2005. In 2006, 1,300 interviews were completed with low-income mothers (1,000 at or below 130% FPL and 300 with incomes between 130%-185% FPL) and 400 with low-income children. In 2007, 1,400 interviews were completed with low-income mothers who were not current CalFresh recipients and 400 with low-income children. The additional 400 interviews with low-income mothers with incomes in the 130%-185% FPL range were done in order to better explore differences between the two income segments and to study how the differences might have evolved over time.

In 2008, approximately 1,000 interviews were completed with non-CalFresh- recipients (130% FPL) who were eligible for the program. In 2009, we interviewed 997 mothers eligible for the program and 460 LIM (130-185% FPL). In 2010, we interviewed 964 eligible mothers and 442 LIM. In 2011, we completed interviews with 1052 mothers eligible for the program and 559 LIM. In 2012, we completed interviews with 993 mothers eligible for the program.

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<sup>1</sup> CalFresh recipient data are not weighted and are representative of all participants in the CalFresh program.

**Exhibit 2.1** Sample Size for 2004-2012 Tracking Surveys

<b>Sample Size for 2004-2012 Tracking Surveys*</b>		
	<b>CalFresh Eligibles**</b>	<b>CalFresh Recipients***</b>
2012 Tracking Survey	993	1026
2011 Tracking Survey	1052	1000
2010 Tracking Survey	964	1010
2009 Tracking Survey	997	1006
2008 Tracking Survey	1011	992
2007 Tracking Survey	997	1005
2006 Tracking Survey	515	1000
2005 Tracking Survey	259	996
2004 Tracking Survey	301	536

\* Table displays Unweighted N's

\*\* CalFresh Eligible are eligible (<130% FPL), but do not utilize the program.

\*\*\* In 2004, the CalFresh Recipient sample was of all recipients, regardless of gender and parental status.

*Data Collection Periods*

Year nine (2012) data were collected from November-December, 2012. In previous years data were also collected in the fall as close to the time that the year's flight of advertising came to an end.

*Interview Length*

The adult interviews averaged approximately 23 minutes in length.

**Design of Telephone Samples**

A list of current California CalFresh recipient mothers was provided to us by the *Network* in order to prepare the samples. This list was comprised of all females age 18-54 receiving CalFresh benefits within the three months prior to the commencement of the study. There also had to be one or more children under age 18 living in the same household. Each year, a random sample of records was drawn from this list.

Historically, cell phone numbers were removed from the sample files. Due to the rapidly increasing number of cell-phone-only households, particularly among our target audiences, in 2007 the decision was made to conduct telephone interviews with CalFresh mothers over cell phones. This practice was carried over into the later studies and through 2012.

In the 2007-2011 studies, the higher-income mothers were sampled through a targeted sample frame, one that was designed to increase the probability of finding mothers of children aged 0-17. The sample frame

was originally designed by Field Research in collaboration with Marketing Systems Group (MSG), a leading supplier of survey samples. Since we used data on household composition to select the households, only those in the universe of households with listed landline and telephone numbers were eligible for selection. While this introduced coverage problems with the sample, we opted for the approach in order to increase sampling efficiency and minimize costs.

### *Call Attempts*

The number of call attempts to reach a respondent and complete an interview are based on a number of factors, including current case status, most recent call outcome, and sample type. In general, cases with histories indicating they may be productive are eligible to receive more call attempts than those with less promising histories, and landline cases are eligible to receive more calls than cell cases.

Call attempts were carefully timed on different days of the week and at different times of day in order to increase the probability of finding an eligible respondent willing to be interviewed. Multiple appointment times were offered to maximize convenience for respondents. For cases in all stages, we typically left a message for respondents no more than once per week and three times total. “Soft” refusals were called back in an attempt to gain an interview.

### **Design of Mall Intercept Samples**

In 2004, the Field Research team selected the initial mall population for the mall intercept samples. In order to be included, malls had to contain on-site research organizations and attract significant numbers of low-income customers. Data on customer demographic characteristics were provided by the mall research organizations. The Field Research team also used U.S. Census data on the demographic composition of the market area for each mall.

Based on these data, malls were selected in each major region of the State including the following cities: Hayward/Newark, Sacramento, Fresno, Bakersfield, Sylmar (in the Los Angeles area), Ventura, Riverside and San Diego.<sup>2</sup> The number of targeted interviews in each region was roughly proportional to the region’s share of the State’s total population.

In 2012, NORC surveyed respondents at the same California malls previously surveyed in 2011 with two exceptions. In Tracy, the mall closed and we could not find a suitable replacement. We relocated these

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<sup>2</sup> In several communities in 2004 (Fresno, Sacramento and Watsonville/Salinas), on-site research organizations did not exist at an appropriate mall. Field Research, instead, contracted with nearby research organizations to conduct the intercept interviews at various public locations. In 2012, all interviews were conducted at mall locations.

interviews to Sacramento. In Canoga Park, the on-site mall research office closed and the mall denied a request to continue to survey. We relocated these interviews to Ventura.

### *2005 Changes*

In 2005, an adjustment was made to improve this proportionality; the number of interviews from Central Valley sites was decreased and the number from Los Angeles was increased. In order to do so, we added malls in Redondo Beach and the City of Industry in Los Angeles County. In other changes, we added a facility in Santa Ana (Orange County) and replaced Hayward/Newark (Alameda County) with San Francisco. We also added a research facility in the Watsonville/Salinas area.

### *2006 Changes*

In 2006 we retained the same general distribution of interviews across the State. Given the increased number of study respondents, two additional malls were added, one in Oakland and one in Tracy. We also added a new mall in Los Angeles to replace one that closed. An additional facility (Watsonville/Salinas) declined to participate in that year's survey.

### *2007 Changes*

For the 2007 tracking survey, we again retained the general distribution of interviews across the state. Two new malls were added in the Inland Empire, one in San Bernardino County and one in Riverside County, to replace a mall that closed. We also added two local data collection partners, Field Management on the west side of Los Angeles (to replace a facility that closed) and Elliot Benson in Sacramento. In 2007, there were 15 intercept sites for the tracking survey.

### *2008 Changes*

For the 2008 survey, one location in the Los Angeles area, Sylmar, was dropped from the study; their cases were reallocated to other Los Angeles area locations. Also, one San Francisco location, Carlene Research, closed its facility; these cases were reallocated to new facilities in Hayward and Milpitas.

### *2009 Changes*

In 2009, we again maintained the same general distributions of interviews across the State although the number of interviews in the Central Valley was increased in order to obtain



large enough sample sizes in the Bakersfield, Sacramento and Fresno media markets. To accommodate, interviews were shifted away from Los Angeles. The Bay Area quota was also decreased slightly.

Three intercept sites closed before 2009 data collection, Field Management's Los Angeles and Milpitas locations and Consumer Pulse in Los Angeles. Four malls were added to make up for the closures: two Quick Test sites located in low-income shopping centers in Los Angeles and two sites run by C&C Research, one in Los Angeles and one in Milpitas. We also added a second site in San Diego to decrease the burden on another location.

Lastly, we looked to add an intercept location in one of the new media markets added to the *Network's* media buy in 2009. We were unable to find malls with interviewing capabilities that met our study criteria in time for data collection. We contracted with an independent research consulting firm in Chico, Gary Bess Associates, but they were only able to complete 9 intercept interviews.

#### *2010 and 2011 Changes*

There were no changes in 2010 and 2011.

#### *2012 Changes*

In 2012, we moved two populations. Due to a mall closure, we moved the Tracy population to Sacramento where Elliott Benson conducted the research. In Canoga Park, Quick Test closed the on-site mall research center. Despite this closure, we submitted a request to the mall Board of Directors to interview. The request was denied for fear that the research would negatively impact the holiday shopping experience. The recruitment effort was moved to Ventura and conducted by Datta Research. Lastly, Quick Test could not meet their African American quota in Santa Ana so they conducted 10 additional interviews with African American respondents in Moreno Valley.

#### *Screening Methods*

Mall interviews were conducted on different days and times of the week over a number of weeks. On each working shift, interviewers were instructed to approach all appropriately aged females in order to screen them for eligibility. To be selected for the sample of the CalFresh eligibles, the woman had to: 1) be 18-54 years old and either a parent or

involved in raising the children living in their home<sup>3</sup> 2) not use CalFresh benefits, food stamps or EBT in the last 12 months, 3) be a California resident living within 20-25 miles of the mall, and 4) report a household income of less than 130% of FPL.

One-third of the interviews were completed with African Americans, one-third with Latinas, and one-third with Californians of other racial/ethnic backgrounds. Interviewing teams in the malls were bilingual, and most malls were required to complete one half of their interviews with Hispanic mothers in Spanish.

In 2012, each adult mall study respondent received a \$15 incentive; in 2006 and prior the incentive was \$10.

## **Survey Questionnaire Development**

In 2004, Field Research worked closely with the *Network* and campaign team to design the Tracking Survey. On most study topics, existing measures were used. Sources include the California Dietary Practices Survey, BRFSS and the NIH-Behavioral Change Consortium. In ensuing years, changes were made to the questionnaires; they are explained below.

Each year, the instruments were adapted for use with those preferring to be interviewed in Spanish. Interviewing was not offered in other languages. See the appendix to this report for the current version of the survey instruments.

### *2005 Modifications*

The survey questionnaire was modified in 2005 to incorporate questions on the new dietary guidelines issued in 2005. In addition, many questions that referenced the previous fruit and vegetable consumption recommendation (five servings) were changed to their approximate cup equivalent, four cups. As the new recommendations varied depending on one's age, gender and level of physical activity, we chose four cups because it corresponded to the amount sedentary women age 18-54 should eat.

### *2006 Modifications*

No changes were made to the instruments in 2006.

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<sup>3</sup> Children must be between 0 to 17 years of age.

### *2007 Modifications*

In 2007 a number of major changes were made in the questionnaires. New knowledge measures focusing on cups rather than servings were added, consistent with the revised dietary guidelines for Americans; new aided and unaided *mypryamid.gov* awareness items were added; and additional new self-efficacy belief measures related to fruit and vegetable consumption and physical activity were added.

Modifications to family change measures were made to be more consistent with new advertising messages. Modifications to normative belief measures were also made to bring them into conformity with the new family change behavioral measures. In addition, minor changes were also made to the behavior change benefits and barriers and policy change advocacy measures.

### *2008 Modifications*

In 2008, a new filter question for unaided ad recall was added to better capture the emphasis in the advertising on change advocacy; measures of unaided recall for radio and outdoor ads were eliminated; questions about ad acceptance, brand awareness and recall of direct mail efforts and the *Network* website were added to the instrument.

Importantly, the social normative measures were modified to focus on what respondents believe that their peers are actually doing rather than what they think. A small number of self-efficacy measures were also added to tie the constructs more closely to the *Network* communications strategy. In addition, new workplace intervention exposure measures were substituted and open-ended, follow-up questions were added to the family change behavioral series to capture how respondents actually promote fruit and vegetable consumption and physical activity to their children.

### *2009 Modifications*

In 2009, there was a major overhaul of the study's self-efficacy measures as they relate to fruit and vegetable consumption and family dietary change; the previous measures related to physical activity remained essentially unchanged. The new fruit and vegetable measures more validly assess self-efficacy in the face of real world situations and challenges confronting low-income mothers. They are explained further in the main body of the report. Measures were also added on new survey topics, social media use and interest in new classroom, support group and other behavior change resources.

### 2010 Modifications

In 2010, minor changes were made to the fruit and vegetable consumption measure. Major changes were made to the physical activity behavioral measures; a new work measure was developed as well as one that combines work and leisure time physical activity. New measures were added on sugar sweetened beverages and awareness of *Rethink Your Drink* campaigns. New measures were also added to the social media section and a battery of items was added on public policies that have been proposed in response to the obesity crisis.

### 2011 Modifications

In 2011, new public policy items were added as were a series of questions on menu calorie labeling and restaurant ordering practices. To assess fruit and vegetable intake in 2011, respondents were asked how often one-half of their plate is filled with fruit and vegetables at mealtimes.

### 2012 Modifications

In 2012, new measures were added to test aided recall of CalFresh radio advertisements as well as awareness about the CalFresh program. New measures were also added to test audience reactions to *Network for a Healthy California* television advertisements and audience opinions about the *Network*. To assess fruit and vegetable intake in 2012, respondents were asked how much of their plate is usually filled with fruits and vegetables at mealtimes. A series of questions about personal and family risk for chronic diseases, including type-2 diabetes, high blood pressure, and heart disease, were also new to the 2012 survey. Items assessing *Rethink Your Drink* awareness and public policies related to obesity were removed.

## Quality Controls/Processing

On an ongoing basis throughout the data collection period, CATI and mall intercept data were reviewed for valid ranges, logical consistency, and other quality indicators in order to be sure that the data were being collected according to study protocol. NORC independently validated ten percent of the completed CATI and intercept surveys. After all the editing and validation work was completed, the open-ended responses were coded and the data sets were prepared for analysis.

## Sample Weighting

In the mall surveys, data are weighted to reflect the actual distribution of racial/ethnic characteristics within the California population of low-income mothers aged 18-54 living with at least one child less than

18 years old. This is necessary since we completed equal numbers of interviews with African Americans (one-third), Latinas (one-third) and Whites and Others (one-third). As noted above, CalFresh recipient data are not weighted as they are representative of all participants in the CalFresh program.

## Study Team

The 2012 study team was led by Larry L. Bye, Senior Fellow at NORC at the University of Chicago. Margrethe Montgomery, Senior Survey Director, Martin Barron, Senior Research Scientist, Andrea Mayfield, Survey Director, Hildie Cohen, Survey Director, and Sari Schy, Survey Specialist, assisted Mr. Bye with oversight of data collection and with data analysis and report preparation.

Sharon Sugerman and Alyssa Ghirardelli, from the *Network*, also played a central role in measures development and overall study planning, as did Lex Matteini, Norma Rivera, and Mehera May from Runyon, Saltzman & Einhorn.

## Overview of Analysis Plan

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A main focus is on annual trends over the three year period, 2010-2012. Nine-year (2004-2012) trends are presented for a small group of important variables if measures have remained constant over the entire period. Responses for 2011 and 2012 were compared using bivariate analysis, including t-tests or chi-square comparisons, where appropriate. Significant differences between 2011 and 2012 responses are noted in the report where they exist. We also performed Ordinary Least Squares Regression in order to model the impact of ad recall and non-ad interventions on a number of composite outcome measures. The type of significance test performed is noted in the footnote of each table or graph.

A second main focus is on audience comparisons – the analysis of differences between the two study populations: CalFresh recipients and CalFresh eligible mothers. While we did not conduct significance testing to compare these Network audiences, we make general observations about potential differences in the report.

In 2012, we also examined differences based on race/ethnicity, chronic disease risk, and overweight status for a subgroup of variables. These analyses are described in further detail in Chapter 3.

## Report Reading Notes

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- Percentages adding up to more than 100% indicate that respondents were allowed to give multiple answers to the question.
- Sometimes, where figures do not add to the totals shown, differences are due to rounding.
- All bases shown for report tables are un-weighted.
- Throughout the tables, when an asterisk (\*) appears in a data cell, it means that the sample size is very small (less than 10); when a double dash (--) appears it means 0; and, when double asterisks (\*\*) appear at the top of a column of numbers it means that so few people were asked the question that significance testing is not possible.
- Unless otherwise stated, the only differences across audiences and over time discussed in the report are those found to be statistically significant using a t-test at the 95% confidence level.
- The circles appearing on report tables are meant to visually identify differences that are statistically significant.

## Sample Characteristics

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This section presents data on the characteristics of the full 2012 Network Benchmark Survey. Sample characteristics for each audience type—CalFresh eligible mothers and CalFresh recipient mothers—are shown in the Appendix of the report.

**Exhibit 2.2** Demographic Characteristics of 2012 *Network Benchmark Survey* Respondents

Demographic Characteristics of 2012 <i>Network Benchmark Survey</i> Respondents	
N Unweighted	2019
	%
<b>Age</b>	
18-24	16
25-34	40
35-50	39
51-64	5
65+	0
<b>Education</b>	
Less than High School	13
High School Graduate/GED	34
Some College	40
College Graduate (BA/BS/Master's/PhD)	12
<b>Race/Ethnicity</b>	
White, Non-Hispanic	26
African American	25
Hispanic/Latino	35
Other Race	14
<b>Free-Reduced Lunch Program Participation</b>	
Yes	63
No	37

- The majority of respondents were between the ages of 25 and 50, were high school graduates or had some college experience, and have school-aged children who receive free or reduced price school meals.
- Race/ethnicity was fairly evenly split among respondents with Hispanic/Latino respondents representing the largest sub-group.
- Income information was asked only of CalFresh eligible mothers and is included in the Appendix of the report.

**Exhibit 2.3** WIC Participation Among 2012 *Network Benchmark Survey* Respondents with Children Aged 5 or Younger

WIC Participation Among 2012 <i>Network Benchmark Survey</i> Respondents with Children Aged 5 or Younger*	
N Unweighted	1102
	%
Yes	70
No	30

\* Question asked only of respondents with children aged 5 or under

- The majority of respondents with children aged 5 or younger have used the WIC program in the last 12 months.

**Exhibit 2.4** Languages Spoken Fluently by 2012 *Network Benchmark Survey* Respondents

Languages Spoken Fluently by 2012 <i>Network Benchmark Survey</i> Respondents*	
N Unweighted	1835
	%
English	68
English and Spanish	24
English and Other Language	8

\* Question asked only of respondents who completed the survey in English

- Among respondents who completed the survey in English, about one-quarter also speak Spanish.



**Exhibit 2.5** Languages Spoken at Home by 2012 *Network Benchmark Survey* Respondents

Languages Spoken at Home by 2012 <i>Network Benchmark Survey</i> Respondents*	
N Unweighted	607
	%
English Only	16
More English than Spanish	25
Both Equally	32
More Spanish than English	13
Spanish Only	13

\*Question asked only of respondents who completed the survey in Spanish or who indicated they speak Spanish in addition to English

- Among Spanish-speaking respondents, the majority speak a mix of Spanish and English in the home.

## Chapter 3: Detailed Findings

This chapter presents detailed study findings, beginning with reported exposure to the campaign.

### 3.1 Reported Exposure

The first part of this chapter presents data on reported exposure to advertising and other interventions promoting healthy eating and physical activity.

#### 3.1.1 Network for a Healthy California Advertising Recall

In 2012, the budget available for *Network* mass media efforts was vastly different from prior years. After a one-year hiatus on advertising spending in 2011, the *Network* funded the highest amount of advertising since the study began in 2004. Data were collected on the recall of current advertising, whereas in 2011, data were collected on the recall of prior year (2010) advertising. As expected, on most of the measures, and for most audience segments, the 2012 scores are higher than the 2011 scores. This pattern generally holds across all the 2012 advertising weight tiers and across all the language and race/ethnic groups broken out in the analysis.

Data from the 2012 survey are presented below.

##### *Aided Recall Data*

To assess aided recall all respondents were read brief descriptions of the recent<sup>4</sup> *Network* ad executions (TV, radio and outdoor) and then asked whether they recalled seeing or hearing any of them.

Respondents were asked about recall of executions in the language they completed the survey in; respondents who completed the survey in English were not asked about *Network* radio ads since all *Network* radio advertising was targeted to Spanish speakers. Aided recall questions about CalFresh radio ads targeted to English and Spanish speakers were added in 2012 for respondents of the appropriate language.

<sup>4</sup> The 2004 survey included descriptions of ads from the 2004 California Nutrition Network campaign. The 2005 survey described ads from the Frontlines campaign which was launched that year. The same Frontlines campaign ads ran during 2006. The 2007 and 2008 campaigns featured the new Ownership ads under the Network/Champions for Change brand. The Ownership campaign was run in 2009 as well, but there were new outdoor and radio ads. Radio was run in Spanish only. In 2010, the 2009 outdoor and radio ads continued to run but there was a new What's Harder? television campaign. For the 2011 survey we asked about the ads that ran most recently, the 2010 ads. The 2012 campaign was a continuation of the What's Harder television ads and the same Spanish radio ads, but the billboard ads featured revised content with the champion mom concept.

Recall scores were adjusted to account for the tendency to give false affirmative or “yea-saying” responses. Respondents were asked about a non-existent ad and responses from individuals who reported recalling nonexistent ads were removed from the calculation of recall scores. The table below shows the distribution of respondents recalling a non-existent ad in 2010-2012:

**Exhibit 3.1** Recall of Fake *Network for a Healthy California* Ads, among Benchmark Participants

Recall of Fake <i>Network for a Healthy California</i> Ads, among Benchmark Respondents			
	CalFresh Eligibles and Recipients		
	2010	2011	2012
N Unweighted	1974	2052	2019
	%	%	%
<b>Respondents Recalling Any Fake Ad</b>	39	43	47
Respondents Recalling Fake TV Ad	23	28	30
Respondents Recalling Fake Radio Ad*	21	22	27
Respondents Recalling Fake Billboard Ad	25	28	29

\* Radio ads were asked only of Spanish speakers. The Unweighted n's for this recall item are: 2010 (n=557), 2011 (n=438), 2012 (n=266).

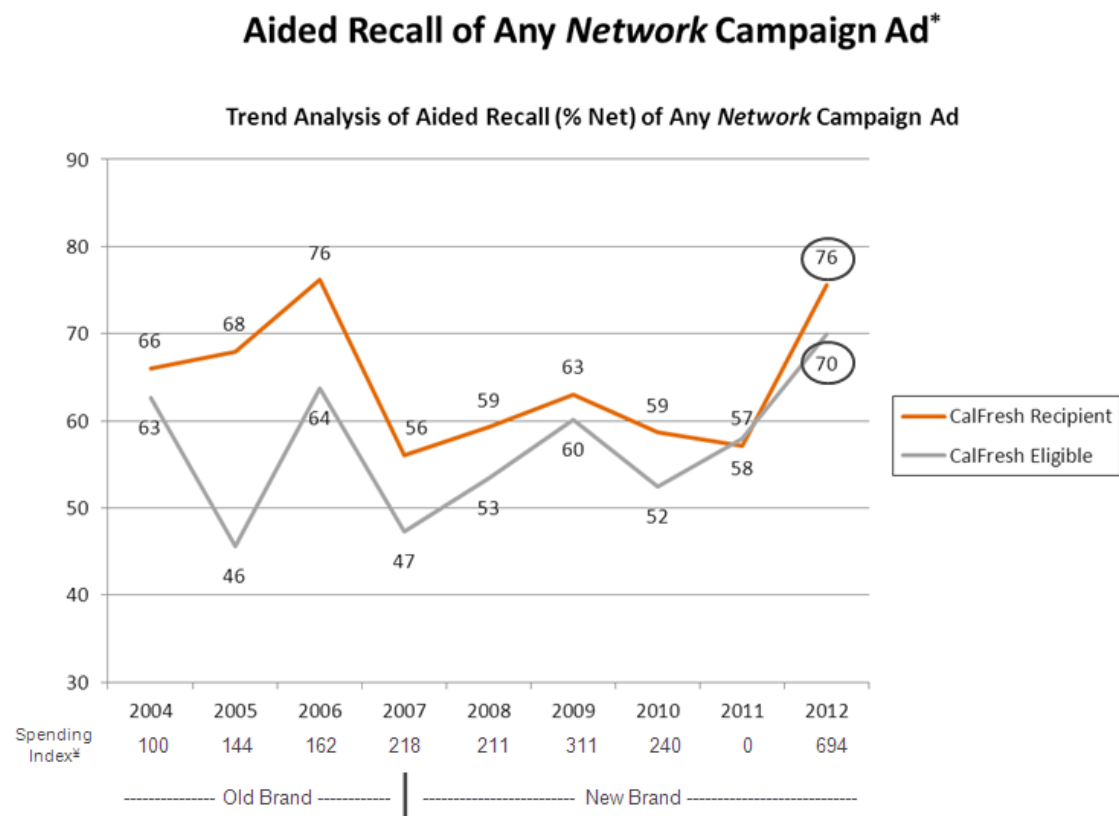
- There were no significant differences in recall of a fake ad for CalFresh eligible and recipient mothers between 2011 and 2012.
- In 2012, nearly half of all CalFresh eligibles and recipients recalled a fake add with approximately one-third recalling in each of the three ad mediums (i.e., tv, radio and billboard).

The following section provides findings for net aided recall as well as recall for each medium, TV, radio, and outdoor.

#### *Aided Recall Trends*

Data is presented on CalFresh recipients' and CalFresh eligibles' aided recall of *Network* ads since 2004, including the data from the 2012 study. This section presents trend data on statewide recall scores over the past nine years including 2012. We look first at net recall and then at medium-specific recall.

## Exhibit 3.2 Aided Recall of Any *Network* Campaign Ad



\*For 2011, recall was "ever recall" since no campaign ran in 2011.

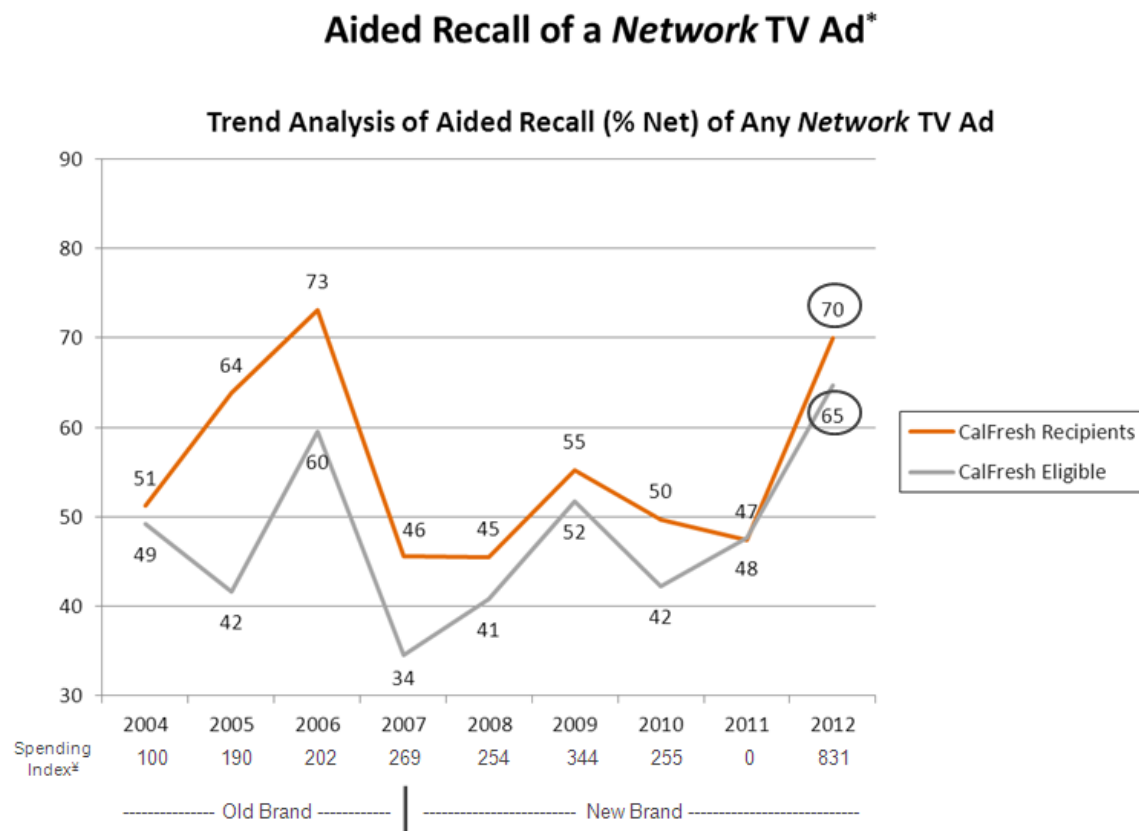
¥ 2012 Spending Index included Network Campaign spending using funds from 2011 and 2012 as well as unspent funds designated for a Rethink your Drink mass media campaign.

° We performed t-test comparisons between 2011 and 2012 responses for each audience type. Circles indicate significant differences at the  $p < 0.05$  level.

\*\*The campaign names run since 2004 are as follows: 2004: School Daze and Paper Dolls; 2005-2006: Frontlines; 2007-2009: Rules; 2010 and 2012: What's Harder.

- The above figure presents the net aided recall data. Net aided recall represents the total percentage of respondents recalling one or more of the *Network* ads. The level of aided recall increased significantly in 2012 for recipients and eligibles.
- The spending index data at the bottom of the figure shows how advertising expenditures changed over time. The index treats 2004 spending as 100%; any percentage greater than 100% represents a proportional increase in spending. In general, spending increased from 2004 through 2009 with a cessation in 2011. The 2012 spending increase was very different, representing the largest expenditure ever in the history of *Network* advertising since 2004.

**Exhibit 3.3** Aided Recall of a *Network* TV Ad



\*For 2011, recall was "ever recall" since no campaign ran in 2011.

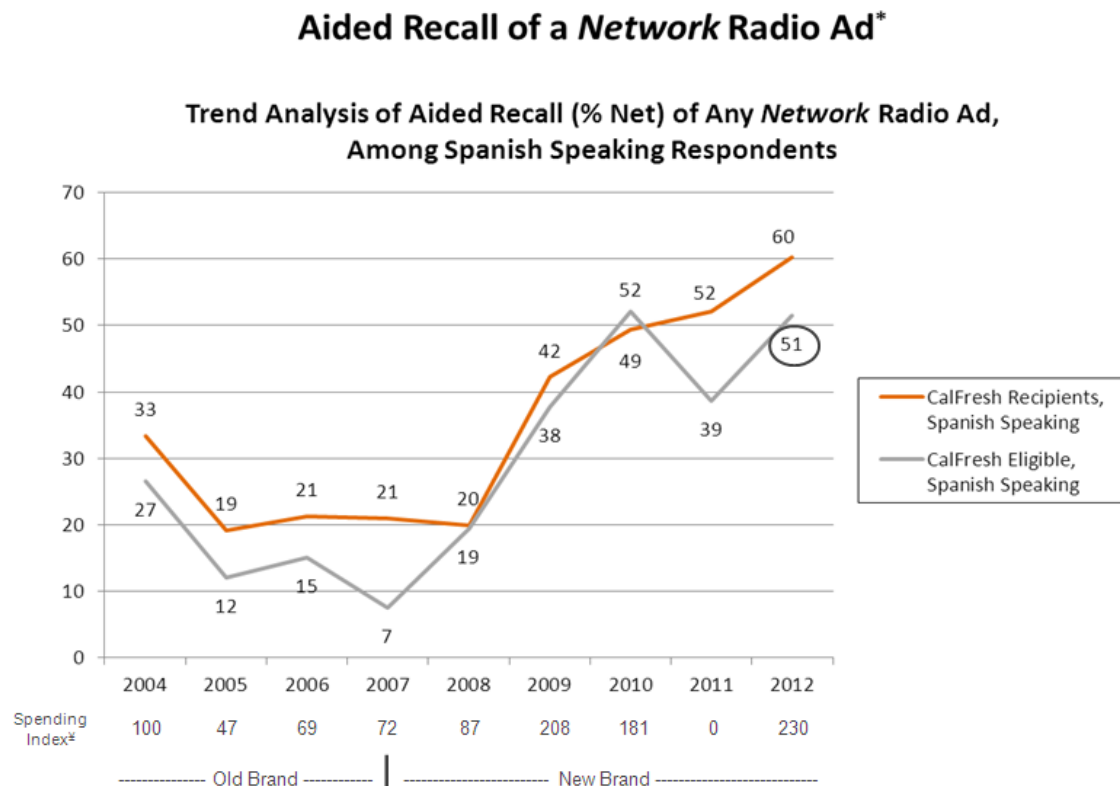
‡ 2012 Spending Index included Network Campaign spending using funds from 2011 and 2012 as well as unspent funds designated for a Rethink your Drink mass media campaign.

° We performed t-test comparisons between 2011 and 2012 responses for each audience type. Circles indicate significant differences at the  $p < 0.05$  level.

\*\*The campaign names run since 2004 are as follows: 2004: School Daze and Paper Dolls; 2005-2006: Frontlines; 2007-2009: Rules; 2010 and 2012: What's Harder.

- The above figure presents the net aided recall data of *Network* TV ads. The level of aided recall of TV ads increased significantly from 2011 to 2012 for recipients and eligibles.
- Television spending increased significantly over the years until 2009. Spending for television in 2012 was over eight times higher than spending in 2004.

### Exhibit 3.4 Aided Recall of a *Network* Radio Ad



\*For 2011, recall was "ever recall" since no campaign ran in 2011.

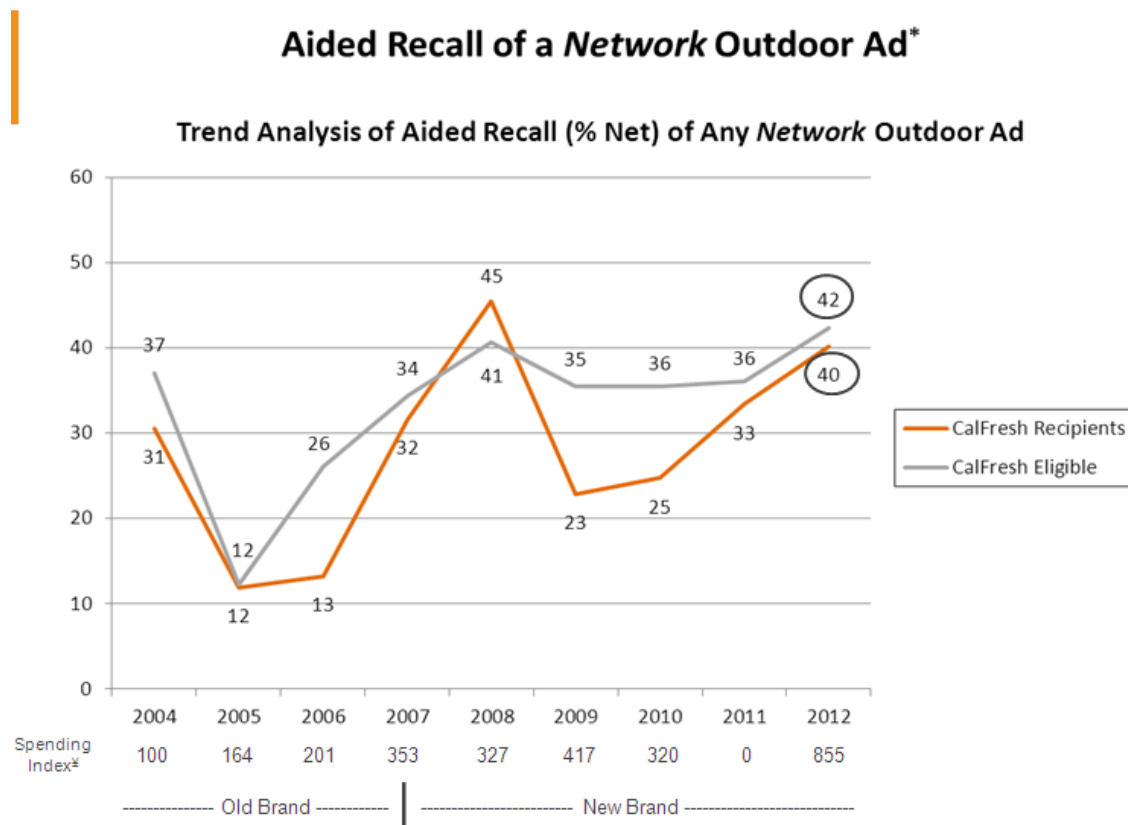
¥ 2012 Spending Index included Network Campaign spending using funds from 2011 and 2012 as well as unspent funds designated for a Rethink your Drink mass media campaign.

° We performed t-test comparisons between 2011 and 2012 responses for each audience type. Circles indicate significant differences at the  $p < 0.05$  level.

\*\*The campaign names run since 2004 are as follows: 2004: School Daze and Paper Dolls; 2005-2006: Frontlines; 2007-2009: Rules; 2010 and 2012: What's Harder.

- *Network* radio advertising was in the Spanish language and was targeted to only Latinos.
- The rate of *Network* radio recall increased in 2012 for both Spanish-speaking recipients and eligibles, however, this increase was only statistically significant for Spanish-speaking eligibles.
- Radio spending increased slightly over 2009, which previously held the highest rate of spending.
- Recall of radio was at the highest level in the history of *Network* ads and has continued to increase even at spending rates close to rates in 2009 and 2010.

**Exhibit 3.5** Aided Recall of a *Network* Outdoor Ad



\*For 2011, recall was "ever recall" since no campaign ran in 2011.

¥ 2012 Spending Index included Network Campaign spending using funds from 2011 and 2012 as well as unspent funds designated for a Rethink your Drink mass media campaign.

° We performed t-test comparisons between 2011 and 2012 responses for each audience type. Circles indicate significant differences at the  $p < 0.05$  level.

\*\*The campaign names run since 2004 are as follows: 2004: School Daze and Paper Dolls; 2005-2006: Frontlines; 2007-2009: Rules; 2010 and 2012: What's Harder.

- Outdoor recall increased significantly in 2012 for both eligibles and recipients.
- Spending on outdoor advertising was the highest since the study's inception in 2004.

**Recall of Campaign by Weight Tier**

This section displays recall scores for the past three years by weight tiers. Weight is a measure of the reach and frequency of the ads being run and is largely a function of the amount of financial resources available to the campaign and the buying strategy.

Starting in 2007 the state was split into three weight tiers: high, medium and low. The markets that make up the weight tiers have changed over time. In 2011, the Los Angeles, Fresno and Bakersfield markets comprised the high weight tier, Sacramento comprised the medium weight tier and the Bay Area and San

Diego comprised the low weight tier. In 2012, Los Angeles, Sacramento, the Bay Area and Fresno comprised the high tier. Bakersfield was not an active market. San Diego, formerly in the low weight tier, comprised the medium weight tier and Palm Springs comprised the low weight tier. The 2012 weight tiers were used to display data for all years.

**Exhibit 3.6** Aided Recall of Any *Network for a Healthy California* Ad, by Market Weight

Aided Recall of Any <i>Network for a Healthy California</i> Ad, by Market Weight*						
	CalFresh Eligible Mothers			CalFresh Recipients		
	2010	2011*	2012	2010	2011*	2012
N Unweighted	540	549	486	634	612	575
	%	%	%	%	%	%
<b>High Weight</b>	<b>56</b>	<b>60</b>	<b>(75)</b>	<b>60</b>	<b>56</b>	<b>(80)</b>
Los Angeles	58	53	(72)	68	63	(84)
Sacramento	48	75	(96)	56	49	(74)
Bay Area**	54	79	69	42	44	(72)
Fresno	50	49	(90)	60	59	(85)
<b>Medium Weight</b>	<b>25</b>	<b>50</b>	62	<b>41</b>	<b>57</b>	<b>67</b>
San Diego**	25	50	62	41	57	67
<b>Low Weight</b>	<b>63</b>	<b>48</b>	<b>(78)</b>	<b>91</b>	<b>69</b>	<b>82</b>
Palm Springs	63	48	(78)	91	69	82
<b>Other Low/No Weight Areas</b>	<b>50</b>	<b>60</b>	<b>45</b>	<b>61</b>	<b>59</b>	<b>49</b>
<b>Total</b>	<b>52</b>	<b>58</b>	<b>(70)</b>	<b>59</b>	<b>57</b>	<b>(76)</b>

‡ DMA Tiers- Markets that make up categories have changed over time. The 2012 tiers were used to display all data. Though included in the high tier in 2010 and 2011, Bakersfield was not an active market in 2012. Sacramento was in the medium tier and the Bay Area and San Diego were low tiers in 2010 and 2011.

\*For 2011, recall was "ever recall" since no campaign ran in 2011.

\*\*In San Diego and the Bay Area, the campaign was mainly Hispanic media in 2010.

° We performed t-test comparisons between 2011 and 2012 responses for each audience type. Circles indicate significant differences at the p<0.05 level.

- Across all weight tiers combined, the 2012 recall levels of any *Network* ad increased significantly for CalFresh eligible and recipient mothers. Recall increased from 58% to 70% for eligible mothers and from 57% to 76% for recipient mothers.
- The 2012 recall level increased significantly in the high weight tier for all recipient markets and 3 out of 4 of the high weight eligible markets. In the medium weight tier, recall increased for both recipients and eligibles, but the increases were not statistically significant. In the low weight tier, recall increased significantly for eligibles only.



**Exhibit 3.7** Aided Recall of Any *Network* for a Healthy California TV Ad, by Market Weight

Aided Recall of Any <i>Network</i> for a Healthy California TV Ad, by Market Weight <sup>‡</sup>						
	CalFresh Eligible Mothers			CalFresh Recipients		
	2010	2011*	2012	2010	2011*	2012
N Unweighted	703	697	637	811	789	774
	%	%	%	%	%	%
<b>High Weight</b>	<b>45</b>	<b>49</b>	<b>(69)</b>	<b>53</b>	<b>49</b>	<b>(75)</b>
Los Angeles	47	45	(70)	61	57	(79)
Sacramento	46	53	(79)	47	42	(68)
Bay Area**	39	58	58	30	36	(62)
Fresno	37	51	71	52	48	(82)
<b>Medium Weight</b>	<b>20</b>	<b>45</b>	<b>54</b>	<b>35</b>	<b>42</b>	<b>51</b>
San Diego**	20	45	54	35	42	51
<b>Low Weight</b>	<b>48</b>	<b>38</b>	<b>(73)</b>	<b>38</b>	<b>57</b>	<b>79</b>
Palm Springs	48	38	(73)	38	57	79
<b>Other Low/No Weight Areas</b>	<b>37</b>	<b>47</b>	<b>41</b>	<b>48</b>	<b>39</b>	<b>38</b>
<b>Total</b>	<b>42</b>	<b>48</b>	<b>(65)</b>	<b>50</b>	<b>47</b>	<b>(70)</b>

‡ DMA Tiers- Markets that make up categories have changed over time. The 2012 tiers were used to display all data. Though included in the high tier in 2010 and 2011, Bakersfield was not an active market in 2012. Sacramento was in the medium tier and the Bay Area and San Diego were low tiers in 2010 and 2011.

\*For 2011, recall was "ever recall" since no campaign ran in 2011.

\*\*In San Diego and the Bay Area, the campaign was mainly Hispanic media in 2010.

° We performed t-test comparisons between 2011 and 2012 responses for each audience type. Circles indicate significant differences at the p<0.05 level.

- Overall, CalFresh eligibles and recipients in all weight tiers combined reported significant increases in recall from 2011 to 2012 with eligibles and recipients reporting 17 and 23 percentage point increases respectively.
- Recall in high weight markets on *Network* TV ads increased significantly for both eligibles and recipients. Recall increased significantly in all individual high weight markets from 2011 to 2012 for recipients. Recall among eligibles increased significantly in Los Angeles and Sacramento.
- In the medium weight tier, recall increased for both recipients and eligibles, but the increase was not statistically significant.
- In the low weight tier, only eligibles showed a statistically significant increase in recall over 2011.

**Exhibit 3.8** Aided Recall of a *Network for a Healthy California* Outdoor Ad, by Market Weight

Aided Recall of a <i>Network for a Healthy California</i> Outdoor Ad, by Market Weight*						
	CalFresh Eligible Mothers			CalFresh Recipients		
	2010	2011*	2012	2010	2011*	2012
N Unweighted	686	744	693	793	743	745
	%	%	%	%	%	%
<b>High Weight</b>	<b>38</b>	<b>39</b>	<b>43</b>	<b>26</b>	<b>33</b>	<b>(42)</b>
Los Angeles	39	36	34	29	37	(47)
Sacramento	43	44	(86)	23	25	33
Bay Area**	30	57	45	16	24	(43)
Fresno	34	32	41	32	38	38
<b>Medium Weight</b>	<b>19</b>	<b>26</b>	<b>39</b>	<b>12</b>	<b>27</b>	<b>32</b>
San Diego**	19	26	39	12	27	32
<b>Low Weight</b>	<b>29</b>	<b>26</b>	<b>(45)</b>	<b>25</b>	<b>41</b>	<b>33</b>
Palm Springs	29	26	(45)	25	41	33
<b>Other Low/No Weight Areas</b>	<b>47</b>	<b>28</b>	<b>41</b>	<b>28</b>	<b>33</b>	<b>24</b>
<b>Total</b>	<b>36</b>	<b>36</b>	<b>(42)</b>	<b>25</b>	<b>33</b>	<b>(40)</b>

¥ DMA Tiers- Markets that make up categories have changed over time. The 2012 tiers were used to display all data. Though included in the high tier in 2010 and 2011, Bakersfield was not an active market in 2012. Sacramento was in the medium tier and the Bay Area and San Diego were low tiers in 2010 and 2011.

\*For 2011, recall was "ever recall" since no campaign ran in 2011.

\*\*In San Diego and the Bay Area, the campaign was mainly Hispanic media in 2010.

° We performed t-test comparisons between 2011 and 2012 responses for each audience type. Circles indicate significant differences at the p<0.05 level.

- On outdoor ads, CalFresh eligibles and recipients reported significant increases in recall over 2011 with 6 and 7 percentage point increases reported respectively.
- In all high weight markets combined, both eligibles and recipients reported increases, but the increase over 2011 was only statistically significant for recipients. High weight recipients in Los Angeles and the Bay Area reported statistically significant increases as well as Sacramento eligibles.
- Recall increased significantly among the low weight eligible.

**Exhibit 3.9** Aided Recall of *Network for a Healthy California* Radio Ad, by Market Weight

Aided Recall of <i>Network for a Healthy California</i> Radio Ad, by Market Weight*						
	CalFresh Eligible Mothers			CalFresh Recipients		
	2010	2011	2012	2010	2011	2012
N Unweighted	144	156	125	298	186	68
	%	%	%	%	%	%
<b>High Weight</b>	<b>52</b>	<b>43</b>	<b>55</b>	<b>46</b>	<b>47</b>	<b>61</b>
Los Angeles	51	33	(54)	49	53	62
Sacramento	40	67	80	62	47	71
Bay Area	48	48	65	27	21	50
Fresno	80	79	(40)	43	45	33
<b>Medium Weight</b>	<b>0</b>	<b>7</b>	<b>27</b>	<b>57</b>	<b>58</b>	<b>75</b>
San Diego	0	7	27	57	58	75
<b>Low/No Weight Areas</b>	<b>63</b>	<b>25</b>	<b>57</b>	<b>67</b>	<b>63</b>	<b>40</b>
<b>Total</b>	<b>52</b>	<b>39</b>	<b>(51)</b>	<b>49</b>	<b>52</b>	<b>60</b>

‡ DMA Tiers- Markets that make up categories have changed over time. The 2012 tiers were used to display all data. Though included in the high tier in 2010 and 2011, Bakersfield was not an active market in 2012. Sacramento was in the medium tier and the Bay Area and San Diego were low tiers in 2010 and 2011.

\*For 2011, recall was "ever recall" since no campaign ran in 2011.

° We performed t-test comparisons between 2011 and 2012 responses for each audience type. Circles indicate significant differences at the p<0.05 level.

- CalFresh eligibles reported significantly higher recall of radio ads in all markets combined from 2011 to 2012.
- The remaining differences in radio ad recall from 2011 to 2012 were generally not significant. In the high weight tier, the Los Angeles eligibles reported the only statistically significant increase in recall while the Fresno eligibles reported the only significant decrease.

**Exhibit 3.10** Aided Recall of Any CalFresh Radio Ads, by Market Weight

<b>Aided Recall of Any CalFresh Radio Ads*, by Market Weight</b>		
	<b>CalFresh Eligible Mothers</b>	<b>CalFresh Recipients</b>
	<b>2012</b>	<b>2012</b>
N Unweighted	993	1026
	%	%
<b>High Weight</b>	<b>53</b>	<b>68</b>
Los Angeles	53	72
Sacramento	78	63
Bay Area	51	61
Fresno	23	61
<b>Medium Weight</b>	<b>47</b>	<b>54</b>
San Diego	47	54
<b>Low/No Weight Areas</b>	<b>49</b>	<b>57</b>
<b>Total</b>	<b>51</b>	<b>66</b>

\*Questions about CalFresh Radio Ads were added in 2012

- A number of questions about CalFresh Radio ads targeting English and Spanish speakers were added in 2012. These questions about English language radio ads were asked only of respondents completing the survey in English while questions about Spanish language ads were asked only of Spanish-speaking respondents.
- Aided recall rates of CalFresh radio ads were higher among recipients as compared to eligibles across all market weight areas with the exception of Sacramento. As CalFresh radio recall questions were added in 2012, no significance testing was conducted to examine annual trend changes.

### *Recall of Campaign by Language*

This section displays statewide recall scores by language. The English-speaking audience is comprised of those respondents who chose to complete the interview in English while those who chose to complete the interview in Spanish make up the Spanish-speaking audience. As in the previous sections, we will first display the net recall scores followed by the medium-specific data.

As the following data illustrate, recall scores across all mediums are once again higher among the Spanish-speaking audience than the English-speaking audience. This pattern has been persistent throughout these studies.

We conducted significance testing in 2012 by language type. Results are not displayed in the tables below, but are noted in the text.

**Exhibit 3.11** Aided Recall of Any *Network* Campaign Ad, English-Speaking Audience

Aided Recall of Any <i>Network</i> Campaign Ad, English-Speaking Audience						
	CalFresh Eligible Mothers			CalFresh Recipients		
	2010	2011*	2012	2010	2011*	2012
N Unweighted	464	455	412	438	492	533
	%	%	%	%	%	%
<b>Yes, Recall Any Ad</b>	<b>48</b>	<b>55</b>	<b>(67)</b>	<b>52</b>	<b>50</b>	<b>(75)</b>
<b>No/Don't Know Any Ad (net)</b>	<b>52</b>	<b>45</b>	<b>33</b>	<b>48</b>	<b>50</b>	<b>25</b>
<i>No recall of any ad</i>	52	44	33	48	49	25
<i>Don't know if recall any ad</i>	0	1	0	0	<1	0

\* For 2011, recall was "ever recall" since no campaign ran in 2011.

° We performed chi-square test comparisons to test the relationship between aided recall and year for each audience type. Responses of "Yes" were compared to all other response categories for 2011 and 2012. Circles indicate significant differences at the  $p < 0.05$  level. No information is provided on significance of 2010-2011 changes.

- Among the English-speaking audience, CalFresh eligibles and recipients reported statistically significant increases in aided recall from 2011 to 2012 with eligibles and recipients reporting 12 and 25 percentage point increases respectively.

**Exhibit 3.12** Aided Recall of Any *Network* Campaign Ad, Spanish-Speaking Audience

Aided Recall of Any <i>Network</i> Campaign Ad, Spanish-Speaking Audience						
	CalFresh Eligible Mothers			CalFresh Recipients		
	2010	2011*	2012	2010	2011*	2012
N Unweighted	76	94	74	196	120	42
	%	%	%	%	%	%
<b>Yes, Recall Any Ad</b>	<b>71</b>	<b>66</b>	<b>(78)</b>	<b>74</b>	<b>85</b>	<b>86</b>
<b>No/Don't Know Any Ad (net)</b>	<b>29</b>	<b>34</b>	<b>22</b>	<b>26</b>	<b>15</b>	<b>14</b>
<i>No recall of any ad</i>	29	33	22	26	15	14
<i>Don't know if recall any ad</i>	0	1	0	0	0	0

\* For 2011, recall was "ever recall" since no campaign ran in 2011.

° We performed chi-square test comparisons to test the relationship between aided recall and year for each audience type. Responses of "Yes" were compared to all other response categories for 2011 and 2012. Circles indicate significant differences at the  $p < 0.05$  level. No information is provided on significance of 2010-2011 changes.

- Among the Spanish-speaking audience in 2012, over three-quarters of CalFresh eligibles and recipients reported aided recall of any *Network* ad. The 12 percentage point increase among eligibles was statistically significant.
- Aided recall of any *Network* Campaign ad was significantly greater among Spanish-speaking eligibles compared to their English-speaking counterparts. Among recipients, the difference in recall by language was not significant.

**Exhibit 3.13** Aided Recall of Any *Network* TV Ad, English-Speaking Audience.

Aided Recall of Any <i>Network</i> TV Ad, English-Speaking Audience						
	CalFresh Eligible Mothers			CalFresh Recipients		
	2010	2011*	2012	2010	2011*	2012
N Unweighted	577	568	529	532	620	710
	%	%	%	%	%	%
<b>Yes, Recall TV Ad</b>	<b>37</b>	<b>44</b>	<b>(60)</b>	<b>44</b>	<b>42</b>	<b>(69)</b>
<b>No/Don't Know TV Ad (net)</b>	<b>63</b>	<b>56</b>	<b>40</b>	<b>56</b>	<b>58</b>	<b>31</b>
<i>No recall of any TV ad</i>	62	54	39	55	58	31
<i>Don't know if recall any TV ad</i>	1	2	1	<1	0	0

\* For 2011, recall was "ever recall" since no campaign ran in 2011.

° We performed chi-square test comparisons to test the relationship between aided recall and year for each audience type. Responses of "Yes" were compared to all other response categories for 2011 and 2012. Circles indicate significant differences at the  $p < 0.05$  level. No information is provided on significance of 2010-2011 changes.

- Among the English-speaking audience in 2012, the majority of CalFresh eligibles and recipients reported recall of a *Network* TV ad. The changes from 2011 to 2012 were statistically significant.

**Exhibit 3.14** Aided Recall of Any *Network* TV Ad, Spanish-Speaking Audience

Aided Recall of Any <i>Network</i> TV Ad, Spanish-Speaking Audience						
	CalFresh Eligible Mothers			CalFresh Recipients		
	2010	2011*	2012	2010	2011*	2012
N Unweighted	126	129	108	279	169	64
	%	%	%	%	%	%
<b>Yes, Recall TV Ad</b>	<b>59</b>	<b>57</b>	<b>(75)</b>	<b>60</b>	<b>67</b>	<b>(81)</b>
<b>No/Don't Know TV Ad (net)</b>	<b>42</b>	<b>43</b>	<b>25</b>	<b>40</b>	<b>33</b>	<b>19</b>
<i>No recall of any TV ad</i>	38	40	25	39	32	19
<i>Don't know if recall any TV ad</i>	3	3	0	1	1	0

\* For 2011, recall was "ever recall" since no campaign ran in 2011.

° We performed chi-square test comparisons to test the relationship between aided recall and year for each audience type. Responses of "Yes" were compared to all other response categories for 2011 and 2012. Circles indicate significant differences at the  $p < 0.05$  level. No information is provided on significance of 2010-2011 changes.

- Among the Spanish-speaking audience in 2012, over three-quarters of CalFresh eligibles and recipients reported aided recall of any *Network* TV ad. These increases from 2011 to 2012 were statistically significant for both eligible and recipient mothers.
- Spanish-speaking eligibles reported significantly greater aided recall of any *Network* TV ad compared to English-speaking eligibles. The difference in aided TV recall between English and Spanish-speaking recipients was not significant.



**Exhibit 3.15** Aided Recall of Any *Network* Radio Ad, Spanish-Speaking Audience

Aided Recall of Any <i>Network</i> Radio Ad, Spanish-Speaking Audience						
	CalFresh Eligible Mothers			CalFresh Recipients		
	2010	2011*	2012	2010	2011*	2012
N Unweighted	144	156	125	298	186	68
	%	%	%	%	%	%
<b>Yes, Recall Radio Ad</b>	<b>52</b>	<b>39</b>	<b>51</b>	<b>49</b>	<b>52</b>	<b>60</b>
<b>No/Don't Know Radio Ad (net)</b>	<b>48</b>	<b>61</b>	<b>49</b>	<b>51</b>	<b>48</b>	<b>40</b>
<i>No recall of any radio ad</i>	48	61	47	51	48	40
<i>Don't know if recall any radio ad</i>	0	<1	2	0	0	0

\* For 2011, recall was "ever recall" since no campaign ran in 2011.

° We performed chi-square test comparisons to test the relationship between aided recall and year for each audience type. Responses of "Yes" were compared to all other response categories for 2011 and 2012. Circles indicate significant differences at the p<0.05 level. No information is provided on significance of 2010-2011 changes.

- Among the Spanish-speaking audience in 2012, 51% of CalFresh eligibles and 60% of recipients reported aided recall of any *Network* Radio ad. Recall for both recipient and eligibles increased from 2011 to 2012, but the difference was significant for eligibles only.

**Exhibit 3.16** Aided Recall of Any CalFresh Radio Ad, English-Speaking Audience

Aided Recall of Any CalFresh Radio Ad*, English-Speaking Audience		
	CalFresh Eligible Mothers	CalFresh Recipients
	2012	2012
N Unweighted	820	928
	%	%
<b>Yes, Recall Radio Ad</b>	<b>48</b>	<b>64</b>
<b>No/Don't Know Radio Ad (net)</b>	<b>52</b>	<b>36</b>
<i>No recall of any radio ad</i>	51	36
<i>Don't know if recall any radio ad</i>	1	0

\* Questions about CalFresh Radio Ads were added in 2012

- In 2012, 48% of English-speaking eligible mothers and 64% of English-speaking recipient mothers reported aided recall of any CalFresh Radio ad. Recipients outscored eligibles by 16 percentage points, however we did not conduct statistical tests to identify if this difference is significant.

**Exhibit 3.17** Aided Recall of Any CalFresh Radio Ad, Spanish-Speaking Audience

Aided Recall of Any CalFresh Radio Ad*, Spanish-Speaking Audience		
	CalFresh Eligible Mothers	CalFresh Recipients
	2012	2012
N Unweighted	173	98
	%	%
<b>Yes, Recall Radio Ad</b>	<b>57</b>	<b>84</b>
<b>No/Don't Know Radio Ad (net)</b>	<b>43</b>	<b>16</b>
<i>No recall of any radio ad</i>	42	16
<i>Don't know if recall any radio ad</i>	1	0

\* Questions about CalFresh Radio Ads were added in 2012

- In 2012, 57% of Spanish-speaking eligibles and 84% of Spanish-speaking recipients reported recall of any CalFresh Radio ad. CalFresh recipients outscored eligibles by 30 percentage points, however we did not conduct tests to identify if this difference is statistically significant.
- Spanish-speaking eligibles and recipients reported significantly greater aided recall of any CalFresh radio ad in 2012 compared to their English-speaking counterparts.

**Exhibit 3.18** Aided Recall of Any *Network* Outdoor Ad, English-Speaking Audience

Aided Recall of Any <i>Network</i> Outdoor Ad, English-Speaking Audience						
	CalFresh Eligible Mothers			CalFresh Recipients		
	2010	2011*	2012	2010	2011*	2012
N Unweighted	568	615	589	526	592	685
	%	%	%	%	%	%
<b>Yes, Recall Outdoor Ad</b>	<b>33</b>	<b>35</b>	<b>40</b>	<b>21</b>	<b>30</b>	<b>39</b>
<b>No/Don't Know Outdoor Ad (net)</b>	<b>67</b>	<b>65</b>	<b>60</b>	<b>79</b>	<b>70</b>	<b>61</b>
<i>No recall of any outdoor ad</i>	65	62	59	79	69	61
<i>Don't know if recall any outdoor ad</i>	2	3	1	0	1	0

\* For 2011, recall was "ever recall" since no campaign ran in 2011.

° We performed chi-square test comparisons to test the relationship between aided recall and year for each audience type. Responses of "Yes" were compared to all other response categories for 2011 and 2012. Circles indicate significant differences at the  $p < 0.05$  level. No information is provided on significance of 2010-2011 changes.

- Among English-speaking CalFresh recipients, there was significant increase in recall from 2011 to 2012.
- Among eligibles, there was a five percentage point increase from 2011 to 2012, but this change was not statistically significant.

**Exhibit 3.19** Aided Recall of Any *Network* Outdoor Ads, Spanish-Speaking Audience

Aided Recall of Any <i>Network</i> Outdoor Ads, Spanish-Speaking Audience						
	CalFresh Eligible Mothers			CalFresh Recipients		
	2010	2011*	2012	2010	2011*	2012
N Unweighted	118	129	104	267	151	60
	%	%	%	%	%	%
<b>Yes, Recall Outdoor Ad</b>	<b>45</b>	<b>38</b>	<b>(48)</b>	<b>33</b>	<b>46</b>	<b>58</b>
<b>No/Don't Know Outdoor Ad (net)</b>	<b>55</b>	<b>62</b>	<b>52</b>	<b>67</b>	<b>54</b>	<b>42</b>
<i>No recall of any outdoor ad</i>	55	61	52	67	54	42
<i>Don't know if recall any outdoor ad</i>	<1	1	0	0	0	0

\* For 2011, recall was "ever recall" since no campaign ran in 2011.

° We performed chi-square test comparisons to test the relationship between aided recall and year for each audience type. Responses of "Yes" were compared to all other response categories for 2011 and 2012. Circles indicate significant differences at the p<0.05 level. No information is provided on significance of 2010-2011 changes.

- Among the Spanish-speaking CalFresh eligibles, there was a significant increase in recall of any outdoor ad from 2011 to 2012. Recipients also reported an increase in aided recall, although this increase was not statistically significant.
- Spanish-speaking recipients reported higher recall of *Network* outdoor ads than their English-speaking counterparts. No significant difference was noted by language among eligibles.

*Recall of Campaign by Race/Ethnicity*

The next set of tables present data on ad recall by race/ethnicity over time. The first table shows net recall scores, followed by medium-specific recall. The tables indicate that 2012 rates of recall were quite high across all of the audience segments.

Significant annual changes between 2011 and 2012 responses are noted in each table where they exist. Significance testing was also conducted to compare responses between each minority group and Whites for 2012 only. Results of these tests are noted in the text following each table.

**Exhibit 3.20** Aided Recall of Any *Network* Campaign Ads, by Race/Ethnicity

Aided Recall of Any <i>Network</i> Campaign Ads, by Race/Ethnicity						
	CalFresh Eligibles			CalFresh Recipients		
	2010	2011*	2012	2010	2011*	2012
N Unweighted	540	546	486	634	612	575
	%	%	%	%	%	%
<b>Total</b>	<b>52</b>	<b>58</b>	<b>(70)</b>	<b>59</b>	<b>57</b>	<b>(76)</b>
<b>Race/Ethnicity</b>						
<i>Non-Hispanic White</i>	48	54	(75)	48	42	(65)
<i>African American</i>	49	53	(75)	53	64	(87)
<i>Hispanic</i>	59	60	69	68	67	(83)
<i>All others</i>	43	54	58	29	44	(71)

\*For 2011, recall was "ever recall" since no campaign ran in 2011.

\* We performed t-test comparisons between 2011 and 2012 responses for each race/ethnic group. Circles indicate significant differences at the  $p < 0.05$  level.

- For CalFresh eligibles, Whites and African Americans reported the highest rates of aided recall for any network ad. They were also the only two race/ethnic groups that reported a statistically significant increase in recall from 2011 to 2012.
- For recipients, all race/ethnic groups reported significantly higher recall over 2011 with African Americans showing the highest rate of recall of any recipient group.
- Aided recall was significantly higher for both African American and Hispanic recipients as compared to their Non-Hispanic White counterparts in 2012.

**Exhibit 3.21** Aided Recall of Any *Network* TV Ad, by Race/Ethnicity

Aided Recall of Any <i>Network</i> TV Ad, by Race/Ethnicity						
	CalFresh Eligibles			CalFresh Recipients		
	2010	2011*	2012	2010	2011*	2012
N Unweighted	703	697	637	811	789	774
	%	%	%	%	%	%
<b>Total</b>	<b>42</b>	<b>48</b>	<b>(65)</b>	<b>50</b>	<b>47</b>	<b>(70)</b>
<b>Race/Ethnicity</b>						
<i>Non-Hispanic White</i>	41	45	(66)	39	33	(57)
<i>African American</i>	35	44	(69)	41	53	(82)
<i>Hispanic</i>	46	50	(65)	58	55	(81)
<i>All others</i>	36	42	54	23	33	(61)

\*For 2011, recall was "ever recall" since no campaign ran in 2011.

° We performed t-test comparisons between 2011 and 2012 responses for each race/ethnic group. Circles indicate significant differences at the  $p < 0.05$  level.

- White, African American and Hispanic CalFresh eligibles reported significantly higher recall of any TV ad over 2011. All race/ethnic recipient groups reported significantly higher recall over 2011 with African American recipients showing the highest rate of recall.
- In 2012, African American and Hispanic recipients reported significantly higher aided TV recall than their White counterparts, however there were no significant differences noted among eligibles.

**Exhibit 3.22** Aided Recall of Any *Network* Outdoor Ad, by Race/Ethnicity.

Aided Recall of Any <i>Network</i> Outdoor Ad, by Race/Ethnicity						
	CalFresh Eligibles			CalFresh Recipients		
	2010	2011*	2012	2010	2011*	2012
N Unweighted	686	744	693	793	749	745
	%	%	%	%	%	%
<b>Total</b>	<b>36</b>	<b>36</b>	<b>(42)</b>	<b>25</b>	<b>33</b>	<b>(40)</b>
<b>Race/Ethnicity</b>						
<i>Non-Hispanic White</i>	28	37	44	14	25	29
<i>African American</i>	37	42	45	26	30	<b>(47)</b>
<i>Hispanic</i>	41	36	40	28	38	<b>(50)</b>
<i>All others</i>	27	29	50	22	34	34

\*For 2011, recall was "ever recall" since no campaign ran in 2011.

\* We performed t-test comparisons between 2011 and 2012 responses for each race/ethnic group. Circles indicate significant differences at the  $p < 0.05$  level.

- For CalFresh eligibles, aided recall of outdoor ads was higher in 2012 than 2011 for all race/ethnic groups, but these differences were not statistically significant. For recipients, both African Americans and Hispanics reported significantly higher recall for outdoor ads over 2011.
- In 2012, African American and Hispanic recipients reported significantly higher aided recall of outdoor ads than their White counterparts. No significant race/ethnic differences were noted among eligibles.

**Exhibit 3.23** Aided Recall of Any CalFresh Radio Ad, by Race/Ethnicity

<b>Aided Recall of Any CalFresh Radio Ad*, by Race/Ethnicity</b>		
	<b>CalFresh Eligibles</b>	<b>CalFresh Recipients</b>
	<b>2012</b>	<b>2012</b>
N Unweighted	993	1026
	%	%
<b>Total</b>	<b>51</b>	<b>66</b>
<b>Race/Ethnicity</b>		
<i>Non-Hispanic White</i>	49	52
<i>African American</i>	46	71
<i>Hispanic</i>	52	74
<i>All others</i>	55	64

\* Questions about CalFresh Radio Ads were added in 2012

- In 2012, Hispanic recipients and “all other” eligibles reported the highest rates of aided recall of any radio ad.
- African Americans, Hispanic, and “all other” recipients reported significantly higher recall of CalFresh radio ads in 2012 compared to Non-Hispanic White recipients. No significant race/ethnic differences were noted among eligibles.

#### *Recall of Campaign by Chronic Disease Risk and Overweight Status*

This section presents data on recall by risk of chronic disease and overweight status. This subgroup analyses was added for key variables in 2012, with the hypothesis that responses for overweight respondents or respondents at risk for chronic diseases might differ from their not overweight or low risk counterparts. In particular, we theorize that compared to their healthy weight and low risk peers, overweight or at-risk respondents might find ads related to healthy eating and physical activity more salient and may participate in more health-seeking behaviors to attempt to improve their health.

In 2012, we added six questions to the survey about personal and family history of chronic diseases, including type-2 diabetes, heart disease, and high blood pressure. For each disease, respondents were asked: “Have you ever been told that you have type-2 diabetes?” and “Has anyone in your immediate family ever been told that they have type-2 diabetes.” Respondents were categorized as “high risk” for chronic disease if they affirmed that they, or anyone in their immediate family, had ever been told they have type-2 diabetes, heart disease, or high blood pressure.



Respondents were also asked to report their height and weight. BMI was calculated from self-reported height and weight responses and classified according to CDC guidelines. If BMI met or exceeded 25.0, respondents were categorized as overweight.

**Exhibit 3.24** Aided Recall of Any *Network* Campaign Ad, by Risk and Overweight

Aided Recall of Any <i>Network</i> Campaign Ad, by Risk and Overweight*		
	CalFresh Eligible Mothers	CalFresh Recipients
	2012	2012
N Unweighted	486	575
	%	%
High Risk	77	76
Low Risk	60	74
Overweight	71	78
Not Overweight	69	72

\* Risk and Overweight sub-group analyses were added in 2012. Respondents were categorized as "high risk" if they affirmed that they, or anyone in their immediate family, had ever been told they have type-2 diabetes, heart disease, or high blood pressure. Respondents were identified as overweight if their BMI met or exceeded 25.0, in accordance with CDC guidelines.

° We performed t-test comparisons between responses for high and low risk groups as well as overweight and not overweight groups within audience type. Circles indicate significant differences at the  $p < 0.05$  level.

- CalFresh eligibles and recipients at high risk for chronic disease reported higher rates of aided recall for any ad than their low risk counterparts. This difference was significant for eligibles only.
- Overweight eligibles and recipients reported higher rates of recall than their counterparts, however these differences were not statistically significant.

**Exhibit 3.25** Aided Recall of Any *Network* TV Ad, by Risk and Overweight

Aided Recall of Any <i>Network</i> TV Ad, by Risk and Overweight*		
	CalFresh Eligible Mothers	CalFresh Recipients
	2012	2012
N Unweighted	637	774
	%	%
High Risk	(73)	71
Low Risk	52	68
Overweight	66	(73)
Not Overweight	63	65

\* Risk and Overweight sub-group analyses were added in 2012. Respondents were categorized as "high risk" if they affirmed that they, or anyone in their immediate family, had ever been told they have type-2 diabetes, heart disease, or high blood pressure. Respondents were identified as overweight if their BMI met or exceeded 25.0, in accordance with CDC guidelines.

\* We performed t-test comparisons between responses for high and low risk groups as well as overweight and not overweight groups within audience type. Circles indicate significant differences at the  $p < 0.05$  level.

- High risk eligibles and recipients reported higher rates of aided recall for any TV ad than their low risk counterparts. This difference was significant for eligible mothers only.
- Overweight eligibles and recipients reported higher rates of recall than their counterparts. This difference was statistically significant for recipient mothers only.

**Exhibit 3.26** Aided Recall of Any *Network* Outdoor Ad, by Risk and Overweight

Aided Recall of Any <i>Network</i> Outdoor Ad, by Risk and Overweight*		
	CalFresh Eligible Mothers	CalFresh Recipients
	2012	2012
N Unweighted	693	745
	%	%
High Risk	42	40
Low Risk	42	40
Overweight	47	42
Not Overweight	36	38

\* Risk and Overweight sub-group analyses were added in 2012. Respondents were categorized as "high risk" if they affirmed that they, or anyone in their immediate family, had ever been told they have type-2 diabetes, heart disease, or high blood pressure. Respondents were identified as overweight if their BMI met or exceeded 25.0, in accordance with CDC guidelines.

° We performed t-test comparisons between responses for high and low risk groups as well as overweight and not overweight groups within audience type. Circles indicate significant differences at the  $p < 0.05$  level.

- There was no difference between high and low risk CalFresh eligibles and recipients in regard to aided recall for any *Network* outdoor ad.
- Overweight eligible and recipient mothers reported higher rates of recall compared their counterparts, however this difference was statistically significant for eligibles only.

**Exhibit 3.27** Aided Recall of Any *Network* Radio Ad, by Risk and Overweight

Aided Recall of Any <i>Network</i> Radio Ad, by Risk and Overweight*		
	CalFresh Eligible Mothers	CalFresh Recipients
	2012	2012
N Unweighted	125	68
	%	%
High Risk	56	60
Low Risk	45	61
Overweight	52	58
Not Overweight	51	67

\* Risk and Overweight sub-group analyses were added in 2012. Respondents were categorized as "high risk" if they affirmed that they, or anyone in their immediate family, had ever been told they have type-2 diabetes, heart disease, or high blood pressure. Respondents were identified as overweight if their BMI met or exceeded 25.0, in accordance with CDC guidelines.

° We performed t-test comparisons between responses for high and low risk groups as well as overweight and not overweight groups within audience type. There were no significant differences at the p<0.05 level.

- In comparison to all other ads, the rate of aided recall for any radio ad shows a distinct pattern. CalFresh eligible high risk and overweight mothers reported higher rates of recall than their counterparts. In contrast, recipient high risk and overweight mothers reported lower rates of recall than their counterparts. None of these differences within audience type were statistically significant.

**Exhibit 3.28** Aided Recall of Any CalFresh Radio Ad, by Risk and Overweight

Aided Recall of Any CalFresh Radio Ad, by Risk and Overweight*		
	CalFresh Eligible Mothers	CalFresh Recipients
	2012	2012
N Unweighted	993	1026
	%	%
High Risk	54	66
Low Risk	47	66
Overweight	54	67
Not Overweight	47	64

\* Risk and Overweight sub-group analyses were added in 2012. Respondents were categorized as "high risk" if they affirmed that they, or anyone in their immediate family, had ever been told they have type-2 diabetes, heart disease, or high blood pressure. Respondents were identified as overweight if their BMI met or exceeded 25.0, in accordance with CDC guidelines.

° We performed t-test comparisons between responses for high and low risk groups as well as overweight and not overweight groups within audience type. Circles indicate significant differences at the  $p < 0.05$  level.

- In terms of aided recall for any CalFresh radio ad, high risk eligibles reported a significantly higher rate of aided recall than low risk eligibles. There was no difference in rate of recall between high and low risk recipients.
- Overweight eligibles and recipients reported higher rates of recall than their not overweight counterparts. This difference was statistically significant for eligibles only.

### 3.1.2 Audience Reactions to Advertising Campaign

Given the increase in advertising in 2012, the *Network* was interested in assessing target audience reactions to the level and content of advertising. Respondents who recalled at least one of the *Network* TV ads were asked for their reaction to the ads: "Was it mostly positive, mostly negative or neither positive nor negative?" Respondents who expressed a positive or negative reaction were asked to explain why they reacted that way. Responses to this question were open-ended and respondents could give up to three reasons to explain their reaction.

Positive and negative respondent reactions were analyzed separately using qualitative methods. NORC researchers categorized each response in terms of the themes expressed. Reactions expressing similar themes were grouped together and tabulated.

**Exhibit 3.29** Target Audience Reaction to *Network* TV Ads

Target Audience Reaction to <i>Network</i> TV Ads*		
	CalFresh Eligible Mothers	CalFresh Recipients
	2012	2012
N Unweighted	881	794
	%	%
<b>Positive</b>	<b>62</b>	<b>89</b>
<b>Negative</b>	<b>1</b>	<b>1</b>
Neither Positive or Negative/No Reaction	34	10
Don't Know	3	0

\* Question about audience reaction to *Network* TV ads was added in 2012

- CalFresh eligible and recipient mothers had overwhelmingly positive reactions to *Network* TV ads with 62% and 89% respectively expressing positive reactions.

**Exhibit 3.30** Qualitative Analysis of Reactions to *Network* Ads-Negative Reactions

Qualitative Analysis of Reactions to <i>Network</i> Ads - Negative Reactions*	
Theme	Frequency (n)
Ads seemed factually incorrect	5
Ads were depressing	6
Ads were not noticeable/too few	7
Ads were unrealistic	7
Ads were not comprehensive	3
Ads did not promote personal choice	1
Ads do not promote acceptance of all body sizes	3
Other	4

\* Respondents were only asked for their reaction to the advertisements if they recalled at least one of the *Network* television ads and stated that they had a positive or negative reaction to the ads. Respondent verbatim responses were analyzed for common themes. The table above displays a summary of themes expressed among English and Spanish language respondents who had negative reactions to *Network* ads.

- Among the 1% of recipient and eligible mothers who expressed negative reactions, the most common complaints were that the ads were unrealistic or not noticeable.

**Exhibit 3.31** Qualitative Analysis of Reactions to *Network* Ads-Positive Reactions

Qualitative Analysis of Reactions to <i>Network</i> Ads - Positive Reactions*	
Theme	Frequency (n)
Ads are a positive influence in childrens' lives	42
Ads empower parents to be proactive in making their home/community a healthier place	211
Ads promote healthy eating	492
Ads promote other healthy behaviors	92
Ads raise awareness about access to nutritious food for low income families (e.g., CalFresh program)	65
Ads raise awareness about children's health issues (e.g., overweight, obesity, diabetes)	175
Ads raise general health awareness	30
Ads send a positive message	94
Ads were attention-grabbing	14
Ads were educational/informative	106
Ads were factual and thought-provoking	113
Ads were relatable	168

\* Respondents were only asked for their reaction to the advertisements if they recalled at least one of the *Network* television ads and stated that they had a positive or negative reaction to the ads. Respondent verbatim responses were analyzed for common themes. The table above displays a summary of themes expressed among English and Spanish language respondents who had positive reactions to the *Network* ads.

- Among recipient and eligible mothers who expressed positive reactions, the most common endorsements were that the ads promoted healthy eating and empowered them to make their home and community a healthier place.

**Exhibit 3.32** Whether Ads Changed Audience Opinions about *Network for a Healthy California*, The Champions for Change

Whether Ads Changed Audience Opinions about <i>Network for a Healthy California</i> , The Champions for Change *		
	CalFresh Eligible Mothers	CalFresh Recipients
	2012	2012
N Unweighted	807	790
	%	%
<b>Yes, Ads Changed Opinions</b>	<b>22</b>	<b>28</b>
<b>No/Don't Know (net)</b>	<b>78</b>	<b>72</b>
<i>No, ads did not change opinions</i>	68	62
<i>Don't know if ads changed opinions</i>	10	10

\* Question about whether ads changed respondent's opinion about the *Network* was new in 2012

- Although the ads engendered overwhelmingly positive feelings, the majority of CalFresh eligibles and recipients reported that the *Network* TV ads did not change their attitudes or behaviors.

**Exhibit 3.33** Audience Discussion of *Network* TV Ads with Others

Audience Discussion of <i>Network</i> TV Ads with Others *		
	CalFresh Eligible Mothers	CalFresh Recipients
	2012	2012
N Unweighted	872	791
	%	%
<b>Yes, Discussed TV Ads</b>	<b>21</b>	<b>27</b>
<b>No/Don't Know (net)</b>	<b>79</b>	<b>73</b>
<i>No Discussion of TV ads</i>	76	73
<i>Don't know if discussed TV ads</i>	3	0

\* Question about whether respondents discussed *Network* ads with others was added in 2012

- Over three-quarters of CalFresh eligibles and recipients reported that they had not discussed the *Network* TV ads with others.



### 3.1.3 Network for a Healthy California Recall & Website Use

The *Network's* Champions for Change brand was developed in 2006 and introduced in 2007. It replaced the earlier, well-established *5-a-Day* brand which had been in place for many years. In 2008 we added measures to the tracking survey to measure recall of the new brand as well as use of the *Network* website.

The first group of tables in this section presents trend data on aided *Network* recall and use of the website.

**Exhibit 3.34** Recall of a *Network for a Healthy California*, The Champions for Change

Recall of a <i>Network for a Healthy California</i> , The Champions for Change						
	CalFresh Eligible Mothers			CalFresh Recipients		
	2010	2011	2012	2010	2011	2012
N Unweighted	961	1050	918	1010	1000	791
	%	%	%	%	%	%
<b>Yes, Recall the <i>Network</i></b>	<b>34</b>	<b>32</b>	<b>33</b>	<b>35</b>	<b>38</b>	<b>45</b>
<b>No/Don't Know the <i>Network</i> (net)</b>	<b>66</b>	<b>68</b>	<b>67</b>	<b>65</b>	<b>62</b>	<b>55</b>
<i>No recall of the <i>Network</i></i>	63	64	62	62	60	51
<i>Don't know if recall the <i>Network</i></i>	3	4	5	3	3	4

° We performed chi-square test comparisons to test the relationship between aided recall and year for each audience type. Responses of "Yes" were compared to all other response categories for 2011 and 2012. Circles indicate significant differences at the  $p < 0.05$  level. No information is provided on significance of 2010-2011 changes.

- Approximately one-third of CalFresh eligibles recalled the *Network* on an aided basis. This percentage has increased slightly since 2011, however this increase was not statistically significant.
- Nearly half of recipients recalled the *Network* on an aided basis, which was a significant increase from 2011.

**Exhibit 3.35** Use of a *Network for a Healthy California*, The Champions for Change Website

Use of a <i>Network for a Healthy California</i> , The Champions for Change Website						
	CalFresh Eligible Mothers			CalFresh Recipients		
	2010	2011	2012	2010	2011	2012
N Unweighted	960	1046	980	1010	1000	1026
	%	%	%	%	%	%
<b>Yes, used <i>Network</i> website</b>	<b>6</b>	<b>5</b>	<b>6</b>	<b>4</b>	<b>4</b>	<b>5</b>
<b>No/Don't Know use of website (net)</b>	<b>94</b>	<b>95</b>	<b>94</b>	<b>96</b>	<b>96</b>	<b>95</b>
<i>No use of the <i>Network</i> website</i>	93	93	93	96	96	93
<i>Don't know if used the <i>Network</i> website</i>	1	2	1	0	0	1

° We performed chi-square test comparisons to test the relationship between website use and year for each audience type. Responses of "Yes" were compared to all other response categories for 2011 and 2012. There were no significant differences at the p<0.05 level. No information is provided on significance of 2010-2011 changes.

- The use of the Champions for Change website remains low. The *Network* has not extensively promoted the website to date.

### 3.1.4 CalFresh Recall and Awareness

In order to better understand eligible and recipient mothers' familiarity with the CalFresh brand, we added three survey questions in 2012. These questions assessed recall of the CalFresh program name, awareness of the CalFresh name change, and receipt of assistance from a community organization when applying to the Food Stamp program.

**Exhibit 3.36** Recall of CalFresh Program

Recall of CalFresh Program *		
	CalFresh Eligible Mothers	CalFresh Recipients
	2012	2012
N Unweighted	991	1026
	%	%
<b>Yes, Recall CalFresh</b>	<b>62</b>	<b>87</b>
<b>No/Don't Know CalFresh (net)</b>	<b>38</b>	<b>13</b>
<i>No recall of CalFresh</i>	37	12
<i>Don't know if recall CalFresh</i>	1	1

\* Question about recall of CalFresh program was added in 2012

- 87% of recipients recalled the CalFresh program. The majority of eligibles (62%) also recalled the CalFresh program.

**Exhibit 3.37** Awareness that CalFresh is the new name for California's Food Stamp Program

Awareness that CalFresh is the new name for California's Food Stamp Program *		
	CalFresh Eligible Mothers	CalFresh Recipients
	2012	2012
N Unweighted	618	896
	%	%
<b>Yes, Aware of Program Name Change</b>	<b>71</b>	<b>94</b>
<b>No/Don't Know about Name Change (net)</b>	<b>29</b>	<b>6</b>
<i>No awareness of program name change</i>	24	6
<i>Don't know about program name change</i>	5	0

\* Question about whether respondent was aware that CalFresh was the new name for California's food stamp program was added in 2012

- The majority of CalFresh eligibles and recipients were aware of the name change with 71% of eligibles and 94% of recipients reporting awareness.

**Exhibit 3.38** Receipt of Assistance from a Non-Profit or Community Based Organization When Applied to CalFresh Program, among CalFresh Recipients.

Receipt of Assistance from a Non-Profit or Community Based Organization When Applied to CalFresh Program, among CalFresh Recipients*	
	CalFresh Recipients
	2012
N Unweighted	1026
	%
<b>Yes, Received Assistance</b>	<b>18</b>
<b>No/Don't Know (net)</b>	<b>82</b>
<i>No receipt of assistance</i>	80
<i>Don't know if received assistance</i>	2

\* Question about whether respondent received assistance when applied to CalFresh program was added in 2012. This question was asked only of CalFresh Recipients.

- Only 18% of CalFresh recipient mothers reported receiving services from a non-profit or community based organization when applying to the CalFresh program.

### 3.1.5 Exposure to Community Interventions

In addition to mass media, the *Network* is a primary sponsor of a variety of community interventions to promote increased fruit and vegetable consumption and physical activity across the State. These interventions include the distribution of posters, brochures and other communication products; classes and workshops; food demonstrations; and health fairs. Data on exposure to these types of efforts are presented in this section. The *Network* is also working on promoting its message in the work environment.

**Exhibit 3.39** Exposure to Healthy Eating and Physical Activity Interventions in the Last 3 Months

Exposure to Healthy Eating and Physical Activity Interventions in the Last 3 Months						
	CalFresh Eligible Mothers			CalFresh Recipients		
	2010	2011	2012	2010	2011	2012
N Unweighted	964	1052	993	1010	1000	1026
	%	%	%	%	%	%
<b>Overall Exposure to One or More Non-Ad Intervention</b>	<b>42*</b>	<b>65</b>	<b>(58)</b>	<b>65*</b>	<b>84</b>	<b>(89)</b>
<i>Participated in a class or workshop</i>	17	24	(19)	27	32	31
<i>Attended a live food demonstration</i>	21	30	(23)	33	34	33
<i>Children brought info home from school</i>	26	37	(31)	46	49	51
<i>Attended health festival or fair</i>	51	55	49	59	55	60
<i>Other written materials*</i>		52	(46)		74	(79)

\* Data for exposure to "Other written materials" was not made available for 2010. "Overall exposure to one or more non-ad intervention" was recalculated using available data.

° We performed t-test comparisons between 2011 and 2012 responses for each audience type. Circles indicate significant differences at the  $p < 0.05$  level.

- Overall, CalFresh eligibles reported significantly less exposure to community interventions from 2011 to 2012. In contrast, recipients reported significantly higher exposure to community interventions than in 2011.
- Written materials and health fairs/festivals continue to be the ways in which *Network* audiences are most frequently exposed to health messages. Among recipients, overall exposure to written materials significantly increased from 2011 to 2012. Eligibles reported significant decreases in exposure among all interventions except health fairs and festivals.
- Participation in workshops was the least common community intervention among both recipients and eligibles.

The following table presents data on exposure to community interventions by race/ethnicity. Throughout the remainder of the report, we will present similar tables for key study variables.

**Exhibit 3.40** Exposure to and Participation in Healthy Eating and Physical Activity Interventions in the Last 3 Months, by Race/Ethnicity

Exposure to and Participation in Healthy Eating and Physical Activity Interventions in the Last 3 Months, by Race/Ethnicity						
	CalFresh Eligibles			CalFresh Recipients		
	2010	2011	2012	2010	2011	2012
N Unweighted	964	1049	993	985	995	1023
	%	%	%	%	%	%
<b>Total</b>	<b>42*</b>	<b>65</b>	<b>58</b>	<b>65*</b>	<b>84</b>	<b>89</b>
<b>Race/Ethnicity</b>						
<i>Non-Hispanic White</i>	48	62	55	68	80	87
<i>African American</i>	43	62	57	64	89	90
<i>Hispanic</i>	40	65	(56)	64	85	(91)
<i>All others</i>	37	71	75	68	88	90

\* Data for exposure to "Other written materials" was not made available for 2010. "Overall exposure to one or more non-ad intervention" was recalculated using available data.

° We performed t-test comparisons between 2011 and 2012 responses for each race/ethnic group. Circles indicate significant differences at the  $p < 0.05$  level.

- Hispanic recipients reported a significant increase in exposure to and participation in interventions from 2011 and 2012. In contrast, Hispanic eligibles reported a significant decrease in exposure and participation in interventions from 2011 to 2012.
- In 2012, eligibles of "All Other" race/ethnic groups reported higher exposure to any community intervention than White eligibles.

**Exhibit 3.41** Exposure to and Participation in Healthy Eating and Physical Activity Interventions in the Last 3 Months, by Risk and Overweight

Exposure to and Participation in Healthy Eating and Physical Activity Interventions in the Last 3 Months, by Risk and Overweight*		
	CalFresh Eligible Mothers	CalFresh Recipients
	2012	2012
N Unweighted	993	1026
	%	%
High Risk	64	89
Low Risk	48	90
Overweight	61	90
Not Overweight	54	89

\* Risk and Overweight sub-group analyses were added in 2012. Respondents were categorized as "high risk" if they affirmed that they, or anyone in their immediate family, had ever been told they have type-2 diabetes, heart disease, or high blood pressure. Respondents were identified as overweight if their BMI met or exceeded 25.0, in accordance with CDC guidelines.

° We performed t-test comparisons between responses for high and low risk groups as well as overweight and not overweight groups within audience type. Circles indicate significant differences at the  $p < 0.05$  level.

- High risk and overweight eligibles reported significantly higher exposure to and participation in community interventions than their counterparts in 2012.
- There was no significant difference between groups for recipient mothers, with all groups reporting high rates of participation.

### 3.1.6 Exposure to Workplace Interventions

In addition to mass media and the community-based interventions, the *Network* has a worksite program to encourage employers to increase healthy food options and physical activity opportunities for their employees.

Data for these measures are presented below. The trend data are presented first followed by the 2012 study population comparisons.

Overall, access to workplace interventions promoting healthy eating and physical activity remains low. The data indicate fairly high use of the benefits, however, when they are available.

**Exhibit 3.42** Access to Employer-Provided Nutrition Related Benefits

Access to Employer-Provided Nutrition Related Benefits						
	CalFresh Eligible Mothers			CalFresh Recipients		
	2010	2011	2012	2010	2011	2012
N Unweighted	963	1050	993	1007	999	1025
	%	%	%	%	%	%
<b>Yes</b>	<b>9</b>	<b>10</b>	<b>(15)</b>	<b>12</b>	<b>15</b>	<b>(18)</b>
<b>No/Don't know/Not applicable (net)</b>	<b>91</b>	<b>90</b>	<b>85</b>	<b>88</b>	<b>85</b>	<b>82</b>
<i>No</i>	67	60	59	48	50	46
<i>Don't Know</i>	1	1	1	0	0	1
<i>Not applicable</i>	23	28	25	40	35	35

° We performed chi-square test comparisons to test the relationship between access and year for each audience type. Responses of "Yes" were compared to all other response categories for 2011 and 2012. Circles indicate significant differences at the p<0.05 level. No information is provided on significance of 2010-2011 changes.

- Both CalFresh eligible and recipient mothers reported significantly higher access to employer-provided nutrition related benefits over 2011. However, access remains relatively low across groups.

**Exhibit 3.43** Use of Access to Employer-Provided Nutrition Related Benefits, Among Those That Report Access

Use of Access to Employer-Provided Nutrition-Related Benefits, Among Those That Report Access						
	CalFresh Eligible Mothers			CalFresh Recipients		
	2010	2011	2012	2010	2011	2012
N Unweighted	92	107	150	125	148	189
	%	%	%	%	%	%
<b>Yes</b>	<b>63</b>	<b>70</b>	<b>74</b>	<b>89</b>	<b>85</b>	<b>84</b>
<b>No/Don't know (net)</b>	<b>37</b>	<b>30</b>	<b>26</b>	<b>11</b>	<b>15</b>	<b>16</b>
<i>No</i>	31	28	26	11	15	15
<i>Don't Know</i>	6	2	0	0	0	1

° We performed chi-square test comparisons to test the relationship between use of access and year for each audience type. Responses of "Yes" were compared to all other response categories for 2011 and 2012. There were no significant differences at the p<0.05 level. No information is provided on significance of 2010-2011 changes.

- Of those CalFresh eligible and recipient mothers offered benefits, there is widespread use. Among eligible mothers, 74% use benefits. Among recipients, the percentage using benefits is even greater at 84%. No significant differences were reported between 2011 and 2012.



**Exhibit 3.44** Access to Employer-Provided Physical Fitness Benefits, Among Those That Report Access

Access to Employer-Provided Physical Fitness Benefits						
	CalFresh Eligible Mothers			CalFresh Recipients		
	2010	2011	2012	2010	2011	2012
N Unweighted	961	1049	787	1009	999	668
	%	%	%	%	%	%
<b>Yes</b>	<b>5</b>	<b>7</b>	<b>(18)</b>	<b>9</b>	<b>10</b>	<b>(16)</b>
<b>No/Don't know/Not applicable (net)</b>	<b>95</b>	<b>93</b>	<b>82</b>	<b>91</b>	<b>90</b>	<b>84</b>
<i>No</i>	70	64	75	52	56	81
<i>Don't Know</i>	1	1	1	0	1	1
<i>Not applicable</i>	24	29	6	40	33	2

° We performed chi-square test comparisons to test the relationship between access and year for each audience type. Responses of "Yes" were compared to all other response categories for 2011 and 2012. Circles indicate significant differences at the  $p < 0.05$  level. No information is provided on significance of 2010-2011 changes.

- Both CalFresh eligible and recipient mothers reported significantly higher access to employer-provided physical fitness benefits over 2011. Access remains relatively low across groups.

### Exhibit 3.45 Use of Access to Employer-Provided Physical Fitness Benefits, Among Those That Report Access

Use of Access to Employer-Provided Physical Fitness Benefits, Among Those That Report Access						
	CalFresh Eligible Mothers			CalFresh Recipients		
	2010	2011	2012	2010	2011	2012
N Unweighted	64	74	124	86	102	110
	%	%	%	%	%	%
<b>Yes</b>	<b>67</b>	<b>59</b>	<b>65</b>	<b>58</b>	<b>58</b>	<b>63</b>
<b>No/Don't know (net)</b>	<b>33</b>	<b>41</b>	<b>35</b>	<b>42</b>	<b>42</b>	<b>37</b>
No	30	38	34	42	42	37
Don't Know	3	3	0	0	0	0

<sup>o</sup> We performed chi-square test comparisons to test the relationship between use of access and year for each audience type. Responses of "Yes" were compared to all other response categories for 2011 and 2012. There were no significant differences at the p<0.05 level. No information is provided on significance of 2010-2011 changes.

- Among CalFresh mothers offered benefits, the majority of eligibles and recipients reported using them. No significant differences were reported for either group between 2011 and 2012.
- When available, there was somewhat less use of fitness benefits than nutrition benefits. In 2012, about six in ten eligible and recipient mothers reported use of fitness benefits whereas about seven in ten eligible and eight in ten recipient mothers reported use of nutrition benefits.

## 3.2 Determinants of Behavior: Knowledge, Attitudes, and Beliefs

The next section presents data on knowledge, attitudes, and beliefs.

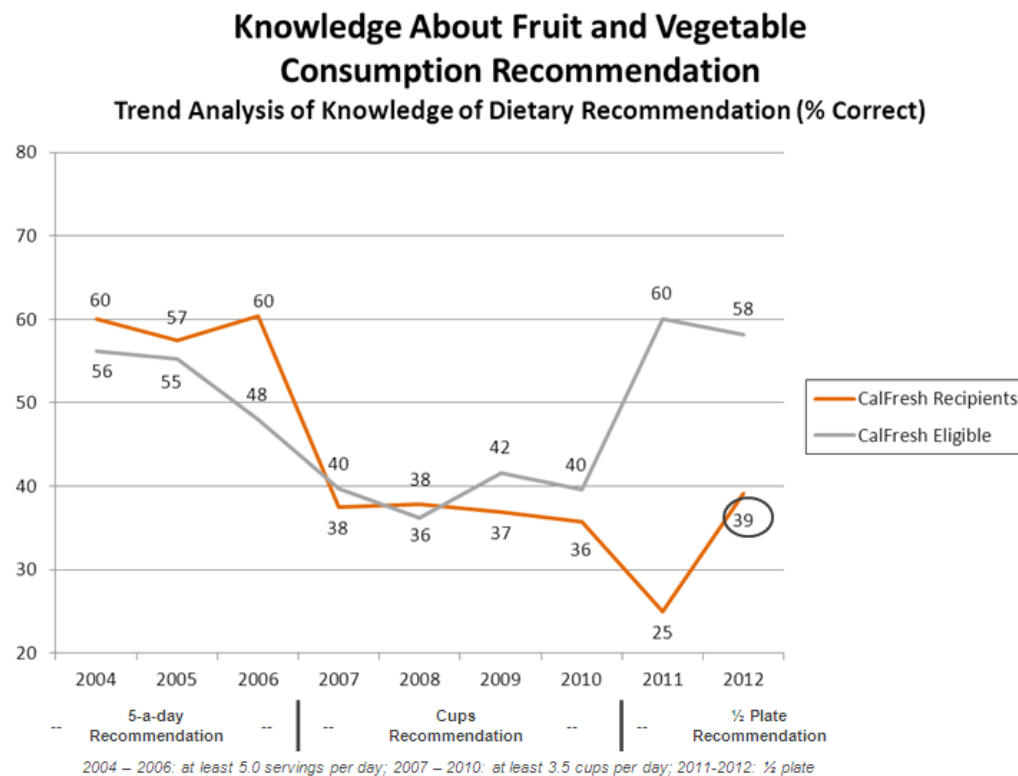
### 3.2.1 Knowledge of Dietary Recommendation & Awareness of My Plate Website

The first data presented in this section are on the behavioral recommendations with regard to fruit and vegetable consumption and awareness of the new [choosemyplate.gov](http://choosemyplate.gov) website. This website replaced the [mypyramid.gov](http://mypyramid.gov) website in 2011.

#### *Knowledge and Awareness Trends*

In order to trend the data on fruit and vegetable consumption knowledge, we looked at the percentage of respondents giving the correct answer for the current year. For 2011 and 2012, the correct answer is one-half plate. In 2007-2010, the correct answer was 3.5-5.0 cups, which is the range for 19-54 year old females of all physical activity levels. In previous years, the correct answer was 5 or more servings.

### Exhibit 3.46 Knowledge About Fruit and Vegetable Consumption Recommendation



° We performed chi-square test comparisons to test the relationship between knowledge and year for each audience type. Responses of "Correct" were compared to all other response categories for 2011 and 2012. Circles indicate significant differences at the  $p < 0.05$  level. No information is provided on significance of 2010-2011 changes.

- From 2011 to 2012, there was a significant increase in knowledge of the half plate recommendation for CalFresh recipients, but not for eligibles. We expected an increase in knowledge levels for both groups given the new easy-to-understand half plate consumption recommendation.

**Exhibit 3.47** Knowledge of Recommended Level of Fruit and Vegetable Consumption  
(3.5-5 cups/half plate)

Knowledge of Recommended Level of Fruit and Vegetable Consumption (3.5 - 5 cups / half plate)*						
	CalFresh Eligible Mothers			CalFresh Recipients		
	2010	2011	2012	2010	2011	2012
N Unweighted	960	1045	992	1010	999	1026
	%	%	%	%	%	%
<b>Correct, 3.5 cups or half plate</b>	<b>40</b>	<b>60</b>	<b>58</b>	<b>36</b>	<b>25</b>	<b>(39)</b>
<b>Incorrect/Don't Know Recommendation (net)</b>	<b>60</b>	<b>40</b>	<b>42</b>	<b>64</b>	<b>75</b>	<b>61</b>
<i>Incorrect</i>	51	29	24	49	62	53
<i>Don't know recommendation</i>	9	11	17	15	13	8

\* In 2010 the recommended level of fruit and vegetable consumption was 3.5-5.0 cups. In 2011 and 2012, it was 1/2 plate. The percent of respondents who know the cups recommendation is tabled for 2010. The percent of respondents who know the 1/2 plate recommendation is tabled for 2011 and 2012.

° We performed chi-square test comparisons to test the relationship between knowledge and year for each audience type. Responses of "Correct" were compared to all other response categories for 2011 and 2012. Circles indicate significant differences at the  $p < 0.05$  level. No information is provided on significance of 2010-2011 changes.

- While CalFresh recipients reported a significant increase in knowledge over 2011, less than half reported awareness of the recommendation. Eligibles reported a higher rate of knowledge than eligibles, but reported an insignificant decrease from 2011 to 2012.

**Exhibit 3.48** Recall of "MyPyramid.gov"/"choose myplate.gov"

Recall of "MyPyramid.gov"/"choosemyplate.gov"						
	CalFresh Eligible Mothers			CalFresh Recipients		
	2010*	2011	2012	2010*	2011	2012
N Unweighted	143	307	211	227	362	444
	%	%	%	%	%	%
<b>Yes, Recall</b>						
<b>MyPyramid.gov/choosemyplate.gov (net)</b>		<b>18</b>	<b>30</b>		<b>18</b>	<b>31</b>
Unaided recall**			2			2
Aided recall		18	(27)		18	(30)
<b>No/Don't Know (net)</b>		<b>82</b>	<b>73</b>		<b>82</b>	<b>70</b>

\* Data for 2010 not available.

\*\*Data for "Unaided recall" not available for 2011.

° We performed t-test comparisons between 2011 and 2012 aided recall responses for each audience type. Circles indicate significant differences at the p<0.05 level.

- Awareness of choosemyplate.gov remained low with 30% of CalFresh recipients and 27% of eligibles recalling the site. Both recipients and eligibles, however, reported significantly higher recall of choosemyplate.gov in 2012 over MyPyramid.gov in 2011.

*Knowledge of Dietary Recommendation: Race/Ethnic Differences*

The following table shows the data on race/ethnic differences.

**Exhibit 3.49** Knowledge of Recommended Level of Fruit and Vegetable Consumption by Race/Ethnicity (%3.5-5 cups/half place)

Knowledge of Recommended Level of Fruit and Vegetable Consumption, by Race/Ethnicity (% 3.5 – 5 cups / half plate)*						
	CalFresh Eligibles			CalFresh Recipients		
	2010	2011	2012	2010	2011	2012
N Unweighted	960	1042	992	985	994	1023
	%	%	%	%	%	%
<b>Total</b>	<b>40</b>	<b>60</b>	<b>58</b>	<b>36</b>	<b>25</b>	<b>(39)</b>
<b>Race/Ethnicity</b>						
<i>Non-Hispanic White</i>	38	57	58	39	24	(42)
<i>African American</i>	40	57	56	34	27	38
<i>Hispanic</i>	43	61	57	34	25	(36)
<i>All others</i>	27	64	68	45	25	(42)

\* In 2010 the recommended level of fruit and vegetable consumption was 3.5-5.0 cups. In 2011 and 2012, it was 1/2 plate. The percent of respondents who know the cups recommendation is tabled for 2010. The percent of respondents who know the 1/2 plate recommendation is tabled for 2011 and 2012.

\* We performed t-test comparisons between 2011 and 2012 responses for each race/ethnic group. Circles indicate significant differences at the  $p < 0.05$  level.

- For CalFresh recipients, White, Hispanic, and “all others” reported significantly higher knowledge over 2011. For eligibles, “All others” reported the highest score with 68% aware of the recommendation in 2012. However, there were no significant increases in knowledge among eligibles for any race/ethnic group from 2011 to 2012.
- There were no significant differences between white and any race/ethnic group in 2012 for eligibles or recipients.

*Knowledge of Dietary Recommendation: Chronic Disease Risk and Overweight Analysis*

The following table shows the subgroup analysis findings on knowledge of dietary recommendation by chronic disease risk and overweight status.

**Exhibit 3.50** Knowledge of Recommended Level of Fruit and Vegetable Consumption, by Risk and Overweight (% half plate)

Knowledge of Recommended Level of Fruit and Vegetable Consumption, by Risk and Overweight (% half plate) <sup>*‡</sup>		
	CalFresh Eligible Mothers	CalFresh Recipients
	2012	2012
N Unweighted	992	1026
	%	%
High Risk	56	40
Low Risk	61	36
Overweight	60	40
Not Overweight	56	38

\* Risk and Overweight sub-group analyses were added in 2012. Respondents were categorized as "high risk" if they affirmed that they, or anyone in their immediate family, had ever been told they have type-2 diabetes, heart disease, or high blood pressure. Respondents were identified as overweight if their BMI met or exceeded 25.0, in accordance with CDC guidelines.

‡ In 2012, the recommended level of fruit and vegetable consumption was 1/2 plate at mealtimes. The percent of respondents who know the 1/2 plate recommendation is tabled for 2012.

° We performed t-test comparisons between responses for high and low risk groups as well as overweight and not overweight groups within audience type. There were no significant differences at the  $p < 0.05$  level.

- Knowledge of the half plate recommendation for risk and overweight sub-groups shows mixed results. None of the differences between high and low risk groups or overweight and not overweight groups were statistically significant.

### 3.2.2 Knowledge of Physical Activity Recommendation

The data presented in this section are on the behavioral recommendation with physical activity.

#### *Knowledge*

In order to examine knowledge of the physical activity recommendation data, we looked at the percentage of respondents giving the correct answer for the current year. In 2012, the correct answer was 150 minutes of physical activity per week for adults and 60 minutes of physical activity per day for children. As very few respondents reported the exact, correct response, we tabled response intervals to most accurately show the distribution of physical activity knowledge. The interval containing the correct response is shown in bold in the tables below.

**Exhibit 3.51** Knowledge of Recommended Level of Physical Activity for Adults

Knowledge of Recommended Level of Physical Activity for Adults (150 minutes per week) <sup>**†‡</sup>		
	CalFresh Eligible Mothers	CalFresh Recipients
	2012	2012
N Unweighted	993	1026
	%	%
0-59 minutes per week	4	8
60-119 minutes per week	7	9
<b>120-179 minutes per week</b>	<b>8</b>	<b>8</b>
180-239 minutes per week	13	14
240-299 minutes per week	7	8
300+ minutes per week	43	44
<i>Don't know recommendation</i>	19	9

\* Data about respondent knowledge of physical activity recommendation for adults not available for 2010 or 2011

† Respondents were asked how much time each week should adults be physically active to stay healthy and could respond in terms of hours per week or minutes per week. All responses were converted to minutes per week.

‡ 1% of CalFresh Eligible Mothers and 1% of CalFresh Recipients gave the correct response of exactly "150 minutes per week."

- Both CalFresh eligibles and recipients overestimated the recommended weekly levels of physical activity with 43% and 44% respectively reporting 300 or more minutes per week rather than the recommended 150 minutes.
- Of note, 1% of eligibles and of recipients gave the correct response of exactly 150 minutes per week.



**Exhibit 3.52** Knowledge of Recommended Level of Physical Activity for Children

<b>Knowledge of Recommended Level of Physical Activity for Children (60 minutes per day)<sup>*†‡</sup></b>		
	<b>CalFresh Eligible Mothers</b>	<b>CalFresh Recipients</b>
	<b>2012</b>	<b>2012</b>
N Unweighted	992	1025
	%	%
0-29 minutes per day	3	3
30-59 minutes per day	9	16
<b>60-89 minutes per day</b>	<b>11</b>	<b>37</b>
90-119 minutes per day	1	2
120-149 minutes per day	8	13
150-179 minutes per day	0	0
180+ minutes per day	52	25
<i>Don't know recommendation</i>	17	5

\* Data about respondent knowledge of physical activity recommendation for children not available for 2010 or 2011

† Respondents were asked how much time each day should children be physically active to stay healthy and could respond in terms of hours per week or minutes per week. All responses were converted to minutes per day

‡ 11% of CalFresh Eligible Mothers and 37% of CalFresh Recipients gave the correct response of exactly "60 minutes per day."

- The majority of CalFresh eligible and recipient mothers were unaware of the correct recommended level of physical activity for their children. Only 11% and 37% of eligible and recipient mothers respectively reported the correct level of weekly physical activity for children.

**3.2.3 Knowledge the Efficacy of Preventative Behaviors**

The data presented below indicate broad and strong agreement about the efficacy of public health recommended preventative behaviors. The data have changed little since this series of studies began.

**Exhibit 3.53** Disagreement that “Eating fruits and vegetables *does not* reduce your risk of getting diseases like Type II diabetes, cancer, or heart disease”

Disagreement that "Eating fruits and vegetables <i>does not</i> reduce your risk of getting diseases like Type II diabetes, cancer, or heart disease"						
	CalFresh Eligible Mothers			CalFresh Recipients		
	2010	2011	2012	2010	2011	2012
N Unweighted	962	1051	991	1008	997	1025
	%	%	%	%	%	%
<b>Disagree (net)</b>	<b>69</b>	<b>72</b>	<b>71</b>	<b>67</b>	<b>73</b>	<b>75</b>
<i>Strongly disagree</i>	54	57	55	55	57	60
<i>Somewhat disagree</i>	14	15	17	12	16	15
<b>Agree/Neither (net)</b>	<b>30</b>	<b>27</b>	<b>27</b>	<b>31</b>	<b>26</b>	<b>24</b>
<b>Don't know</b>	<b>1</b>	<b>2</b>	<b>1</b>	<b>2</b>	<b>1</b>	<b>1</b>

° We performed chi-square test comparisons to test the relationship between knowledge and year for each audience type. Responses of "Correct" were compared to all other response categories for 2011 and 2012. There were no significant differences at the  $p < 0.05$  level. No information is provided on significance of 2010-2011 changes.

- In 2009, in an effort to assess possible problems with this measure, the item was revised and the double negative removed. Results indicated that the measure was indeed problematic for some respondents. Disagreement levels increased when the double negative phrasing was eliminated. In order to facilitate trend analysis, we retained the original measure in order to see changes over time. Readers should keep in mind that the actual levels of knowledge are likely higher than the data suggest.
- There were no significant changes from 2011 to 2012 for CalFresh eligibles or recipients; the rate of agreement on the health benefits of fruit and vegetable consumption remained relatively stable over time.

**Exhibit 3.54** Agreement that “Being physically active will reduce your risk of getting diseases like Type II diabetes, cancer or heart disease”

Agreement that "Being physically active will reduce your risk of getting diseases like Type II diabetes, cancer or heart disease"						
	CalFresh Eligible Mothers			CalFresh Recipients		
	2010	2011	2012	2010	2011	2012
N Unweighted	962	1050	989	1010	999	1025
	%	%	%	%	%	%
<b>Agree (net)</b>	<b>90</b>	<b>88</b>	<b>(84)</b>	<b>95</b>	<b>93</b>	<b>91</b>
Strongly agree	74	71	62	87	83	81
Somewhat agree	15	16	22	8	10	11
<b>Disagree/Neither (net)</b>	<b>10</b>	<b>12</b>	<b>15</b>	<b>5</b>	<b>7</b>	<b>8</b>
<b>Don't Know</b>	<b>0</b>	<b>1</b>	<b>1</b>	<b>0</b>	<b>1</b>	<b>0</b>

° We performed chi-square test comparisons to test the relationship between knowledge and year for each audience type. Responses of "Correct" were compared to all other response categories for 2011 and 2012. Circles indicate significant differences at the  $p < 0.05$  level. No information is provided on significance of 2010-2011 changes.

- There was broad and strong agreement about the chronic disease prevention benefits of participation in physical activity. 84% of CalFresh eligibles and 91% of recipients agreed that physical activity will reduce risk of certain diseases. However, eligibles reported a significant decrease in agreement from 2011 to 2012.

### 3.2.4 Social Normative Beliefs

Social normative beliefs are known to be one of the main determinants of health behavior<sup>5</sup> and changing them is a goal, but not the primary focus of the *Network* campaign. Our measures of normative support have evolved over time. Initially, we asked people their perceptions of what their peers thought. In 2008, we modified the measures to focus on what respondents perceived their peers were actually doing. The new measures were based on the work of Sorenson.<sup>6</sup>

Data on normative support are presented in the following section. They show a continued increase in perceived support among CalFresh recipient and eligible mothers but, at the same time, a tremendous disparity in higher- and lower- income normative environments.

#### *Social Normative Beliefs: Trends*

Data on social normative beliefs for CalFresh eligibles and recipients are presented below.

<sup>5</sup> Fishbein, M. and Capella, J. The Role of Theory in Developing Effective Health Communications, *Journal of Communication*. 2006; 56(S1): S1-S17.

<sup>6</sup> Sorenson G, et al. The Influence of Social Context on Changes in Fruit and Vegetable Consumption: Results of the Healthy Directions Studies, *Framing Health Matters*. 2007;97(7):1216-27.

**Exhibit 3.55** Social Normative Beliefs: Healthy Eating and Physical Activity, "How many people do you know eat enough fruits and vegetables every day?"

Social Normative Beliefs: Healthy Eating and Physical Activity, "How many people you know eat enough fruits and vegetables every day?"						
	CalFresh Eligible Mothers			CalFresh Recipients		
	2010	2011	2012	2010	2011	2012
N Unweighted	958	1050	993	1008	996	1026
	%	%	%	%	%	%
<b>Most/All</b>	<b>29</b>	<b>28</b>	<b>30</b>	<b>26</b>	<b>30</b>	<b>(37)</b>
Some	38	41	47	37	41	35
Few/None	31	24	19	32	26	27
Don't Know	3	7	4	5	3	1

° We performed chi-square test comparisons to test the relationship between social normative beliefs and year for each audience type. Responses of "Most/All" were compared to all other response categories for 2011 and 2012. Circles indicate significant differences at the  $p < 0.05$  level. No information is provided on significance of 2010-2011 changes.

- Nearly one-third of CalFresh eligibles believed most or all of the other people they know "eat enough fruits and vegetables".
- Recipients reported a significant increase in this category from 2011 to 2012 with 37% expressing this belief.

**Exhibit 3.56** Social Normative Beliefs: Healthy Eating and Physical Activity, "How many people do you know are physically active every day?"

Social Normative Beliefs: Healthy Eating and Physical Activity, "How many people you know are physically active every day?"						
	CalFresh Eligible Mothers			CalFresh Recipients		
	2010	2011	2012	2010	2011	2012
N Unweighted	950	1045	992	1009	1000	1026
	%	%	%	%	%	%
<b>Most/All</b>	<b>29</b>	<b>26</b>	<b>30</b>	<b>23</b>	<b>26</b>	<b>29</b>
Some	40	44	49	41	41	43
Few/None	28	23	18	34	32	28
Don't Know	3	6	4	3	2	1

° We performed chi-square test comparisons to test the relationship between social normative beliefs and year for each audience type. Responses of "Most/All" were compared to all other response categories for 2011 and 2012. There were no significant differences at the  $p < 0.05$  level. No information is provided on significance of 2010-2011 changes.

- Normative support for daily physical activity increased among CalFresh eligibles and recipients from 2011 to 2012, however these increases were not statistically significant.

**Exhibit 3.57** Social Normative Beliefs: Family Change Efforts, "How many mothers do you know make it easy for their children to eat fruits and vegetables every day?"

Social Normative Beliefs: Family Change Efforts, "How many mothers you know make it easy for their children to eat fruits and vegetables, every day?"						
	CalFresh Eligible Mothers			CalFresh Recipients		
	2010	2011	2012	2010	2011	2012
N Unweighted	961	1050	993	1008	998	1026
	%	%	%	%	%	%
<b>Most/All</b>	<b>35</b>	<b>32</b>	<b>31</b>	<b>30</b>	<b>35</b>	<b>38</b>
Some	37	44	53	38	39	37
Few/None	25	17	14	29	22	22
Don't Know	3	7	3	3	4	2

° We performed chi-square test comparisons to test the relationship between social normative beliefs and year for each audience type. Responses of "Most/All" were compared to all other response categories for 2011 and 2012. There were no significant differences at the  $p < 0.05$  level. No information is provided on significance of 2010-2011 changes.

- Among CalFresh recipients, from 2011 to 2012 there was an increase in those that said "most/all" mothers they know "make it easy for their children to eat fruits and vegetables", however this increase was not statistically significant.
- Eligibles reported a one percentage point decrease in those that said "most/all" from 2011 to 2012, which was not statistically significant.

**Exhibit 3.58** Social Normative Beliefs: Family Change Efforts, "How many mothers do you know set limits on the amount of unhealthy food they have in the home for their children to snack on?"

Social Normative Beliefs: Family Change Efforts, "How many mothers you know set limits on the amount of unhealthy food they have in their home for their children to snack on?"						
	CalFresh Eligible Mothers			CalFresh Recipients		
	2010	2011	2012	2010	2011	2012
N Unweighted	960	1050	992	1009	998	1026
	%	%	%	%	%	%
<b>Most/All</b>	<b>29</b>	<b>27</b>	<b>27</b>	<b>24</b>	<b>30</b>	<b>31</b>
Some	39	43	51	39	39	41
Few/None	25	22	20	33	26	26
Don't Know	6	8	2	4	5	3

<sup>o</sup> We performed chi-square test comparisons to test the relationship between social normative beliefs and year for each audience type. Responses of "Most/All" were compared to all other response categories for 2011 and 2012. There were no significant differences at the  $p < 0.05$  level. No information is provided on significance of 2010-2011 changes.

- In terms of limit setting on unhealthy foods, there were no statistically significant differences in social normative support from 2011 to 2012 for CalFresh eligibles or recipients. Response trends have remained relatively stable over time, however both eligibles and recipients reported non-significant increases in the "some" category over 2011.

**Exhibit 3.59** Social Normative Beliefs: Family Change Efforts, "How many mothers do you know set limits on the amount of sweetened beverages they have in the home for their children to drink?"

Social Normative Beliefs: Family Change Efforts, "How many mothers set limits on the amount of sweetened beverages they have in their home for their children to drink?"						
	CalFresh Eligible Mothers			CalFresh Recipients		
	2010	2011	2012	2010	2011	2012
N Unweighted	961	1049	993	1009	998	1026
	%	%	%	%	%	%
<b>Most/All</b>	<b>28</b>	<b>27</b>	<b>26</b>	<b>25</b>	<b>29</b>	<b>30</b>
Some	38	42	49	41	37	39
Few/None	28	23	22	31	29	29
Don't Know	6	7	2	4	5	2

° We performed chi-square test comparisons to test the relationship between social normative beliefs and year for each audience type. Responses of "Most/All" were compared to all other response categories for 2011 and 2012. There were no significant differences at the  $p < 0.05$  level. No information is provided on significance of 2010-2011 changes.

- In terms of limit setting on unhealthy beverages, there were no statistically significant increases in social normative support from 2011 to 2012 for CalFresh eligibles or recipients. As with limit setting on unhealthy foods, response trends have remained relatively stable over time.

**Exhibit 3.60** Social Normative Beliefs: Family Change Efforts, "How many mothers do you know make it easy for their children to be physically active every day?"

Social Normative Beliefs: Family Change Efforts, "How many mothers you know make it easy for their children to be physically active every day?"						
	CalFresh Eligible Mothers			CalFresh Recipients		
	2010	2011	2012	2010	2011	2012
N Unweighted	959	1049	992	1008	997	1026
	%	%	%	%	%	%
<b>Most/All</b>	<b>37</b>	<b>40</b>	<b>37</b>	<b>32</b>	<b>39</b>	<b>43</b>
Some	40	39	47	39	38	36
Few/None	20	15	14	26	20	19
Don't Know	3	6	2	2	4	2

° We performed chi-square test comparisons to test the relationship between social normative beliefs and year for each audience type. Responses of "Most/All" were compared to all other response categories for 2011 and 2012. There were no significant differences at the  $p < 0.05$  level. No information is provided on significance of 2010-2011 changes.

- Fewer CalFresh eligibles reported "most/all" other mothers help children be physically active each day while recipients reported an increase in this category. Neither of these differences were statistically significant.
- Recipient and eligible mothers reported slight decreases in the "few/none" category, but these decreases were not statistically significant.<sup>7</sup>

<sup>7</sup> This pattern of positive change among CalFresh recipients is one that repeats across many of the other important outcome measures. We conducted additional analyses in 2011 and 2012, which suggests that CalFresh recipients are more likely to be help-seekers and that participation in programs is associated with positive belief and behavioral outcomes. For example, recipients are significantly more likely than eligibles to be WIC program participants and these dual program participants are likely to have higher scores on some of our outcome measures.



**Exhibit 3.61** Social Normative Beliefs: Family Change Efforts, "How many mothers do you know set limits on the amount of TV their children watch each day?"

Social Normative Beliefs: Family Change Efforts, "How many mothers you know set limits on the amount of TV their children watch each day?"						
	CalFresh Eligible Mothers			CalFresh Recipients		
	2010	2011	2012	2010	2011	2012
N Unweighted	958	1049	991	1008	999	1026
	%	%	%	%	%	%
<b>Most/All</b>	<b>26</b>	<b>26</b>	<b>27</b>	<b>18</b>	<b>25</b>	<b>27</b>
Some	36	40	49	37	36	35
Few/None	31	25	20	40	34	34
Don't Know	6	8	4	5	5	3

° We performed chi-square test comparisons to test the relationship between social normative beliefs and year for each audience type. Responses of "Most/All" were compared to all other response categories for 2011 and 2012. There were no significant differences at the  $p < 0.05$  level. No information is provided on significance of 2010-2011 changes.

- In terms of limit setting on television viewing, CalFresh recipients and eligibles reported small increases in social normative support from 2011 to 2012, but these differences were not statistically significant.

*Social Normative Beliefs: Race/Ethnic Differences*

The next set of tables display the data on race/ethnic differences. The first two tables look at normative support for individual behaviors followed by tables on support for family change behaviors.

**Exhibit 3.62** Social Normative Beliefs about Meeting Recommendations: “How many people do you know eat enough fruits and vegetables every day?” (% Most/All), by Race/Ethnicity

Social Normative Beliefs about Meeting Recommendations, “How many people you know eat enough fruit and vegetables every day?” (% Most/All), by Race/Ethnicity						
	CalFresh Eligibles			CalFresh Recipients		
	2010	2011	2012	2010	2011	2012
N Unweighted	958	1050	993	1008	996	1026
	%	%	%	%	%	%
<b>Total</b>	<b>29</b>	<b>28</b>	<b>30</b>	<b>26</b>	<b>30</b>	<b>(37)</b>
<b>Race/Ethnicity</b>						
<i>Non-Hispanic White</i>	28	31	30	24	29	<b>(41)</b>
<i>African American</i>	25	26	28	25	31	41
<i>Hispanic</i>	30	27	28	26	30	31
<i>All others</i>	29	28	40	34	31	38

\* We performed t-test comparisons between 2011 and 2012 responses for each race/ethnic group. Circles indicate significant differences at the  $p < 0.05$  level.

- White CalFresh recipients reported a significant increase in the “most/all” category from 2011 to 2012.
- Hispanic recipients reported a significantly lower rate than Whites in the “most/all” category in 2012.

**Exhibit 3.63** Social Normative Beliefs about Meeting Recommendations: “How many people do you know are physically active every day?” (% Most/All), by Race/Ethnicity

Social Normative Beliefs about Meeting Recommendations, “How many people you know are physically active every day?” (% Most/All), by Race/Ethnicity						
	CalFresh Eligibles			CalFresh Recipients		
	2010	2011	2012	2010	2011	2012
N Unweighted	950	1045	992	1009	1000	1026
	%	%	%	%	%	%
<b>Total</b>	<b>29</b>	<b>26</b>	<b>30</b>	<b>23</b>	<b>26</b>	<b>29</b>
<b>Race/Ethnicity</b>						
<i>Non-Hispanic White</i>	27	27	<b>(36)</b>	34	33	37
<i>African American</i>	26	26	28	25	36	32
<i>Hispanic</i>	28	25	28	18	20	23
<i>All others</i>	35	30	33	25	28	26

\* We performed t-test comparisons between 2011 and 2012 responses for each race/ethnic group. Circles indicate significant differences at the  $p < 0.05$  level.

- White CalFresh eligibles reported a significant increase in the “most/all” category from 2011 to 2012.
- African American, Hispanic eligibles, and “all other” recipients reported significantly lower rates than Whites in the “most/all” category in 2012.

**Exhibit 3.64** Social Normative Beliefs About Supporting Fruit and Vegetable Consumption: “How many mothers you know make it easy for their children to eat fruits and vegetables every day? (% Most/All), by Race/Ethnicity

Social Normative Beliefs about Supporting Fruit and Vegetable Consumption, “How many mothers you know make it easy for their children to eat fruits and vegetables every day?” (% Most/All), by Race/Ethnicity						
	CalFresh Eligibles			CalFresh Recipients		
	2010	2011	2012	2010	2011	2012
N Unweighted	961	1050	993	1008	998	1026
	%	%	%	%	%	%
<b>Total</b>	<b>35</b>	<b>32</b>	<b>31</b>	<b>30</b>	<b>35</b>	<b>38</b>
<b>Race/Ethnicity</b>						
<i>Non-Hispanic White</i>	30	40	40	36	44	46
<i>African American</i>	29	32	34	34	35	41
<i>Hispanic</i>	37	28	29	27	33	33
<i>All others</i>	36	33	25	34	29	37

\* We performed t-test comparisons between 2011 and 2012 responses for each race/ethnic group. There were no significant differences at the  $p < 0.05$  level.

- Overall and within each race/ethnic group, the percentage of CalFresh recipient and eligible mothers who reported “most/all” in social normative beliefs around facilitating fruit and vegetable consumption increased or remained constant from 2011 to 2012. None of these differences were statistically significant.
- Hispanic and “all other” eligibles reported significantly lower rates than Whites in the “most/all” category in 2012.
- Hispanic recipients reported a significantly lower rate than Whites in the “most/all” category in 2012.

**Exhibit 3.65** Social Normative Beliefs About Supporting Fruit and Vegetable Consumption: “How many mothers you know set limits on the amount of unhealthy food they have in their home for their children to snack on (% Most/All), by Race/Ethnicity

Social Normative Beliefs about Supporting Fruit and Vegetable Consumption, “How many mothers you know set limits on the amount of unhealthy food they have in their home for their children to snack on?” (% Most/All), by Race/Ethnicity						
	CalFresh Eligibles			CalFresh Recipients		
	2010	2011	2012	2010	2011	2012
N Unweighted	960	1050	992	1009	998	1026
	%	%	%	%	%	%
<b>Total</b>	<b>29</b>	<b>27</b>	<b>27</b>	<b>24</b>	<b>30</b>	<b>31</b>
<b>Race/Ethnicity</b>						
<i>Non-Hispanic White</i>	29	35	31	34	35	37
<i>African American</i>	22	29	26	26	31	29
<i>Hispanic</i>	29	25	26	22	28	27
<i>All others</i>	35	23	30	20	30	31

\* We performed t-test comparisons between 2011 and 2012 responses for each race/ethnic group. There were no significant differences at the  $p < 0.05$  level.

- In terms of social normative beliefs around setting limits on unhealthy food consumption, response rates have remained relatively stable over time with no significant differences reported for eligible or recipient mothers from 2011 to 2012.
- Hispanic recipients reported a significantly lower rate than Whites in the “most/all” category in 2012.

**Exhibit 3.66** Social Normative Beliefs About Supporting Fruit and Vegetable Consumption: “How many mothers you know set limits on the amount of sweetened beverages they have in the home for children to drink?? (% Most/All), by Race/Ethnicity

Social Normative Beliefs about Supporting Fruit and Vegetable Consumption, “How many mothers you know set limits on the amount of sweetened beverages they have in the home for children to drink??” (% Most/All), by Race/Ethnicity						
	CalFresh Eligibles			CalFresh Recipients		
	2010	2011	2012	2010	2011	2012
N Unweighted	961	1049	993	1009	998	1026
	%	%	%	%	%	%
<b>Total</b>	<b>28</b>	<b>27</b>	<b>26</b>	<b>25</b>	<b>29</b>	<b>30</b>
<b>Race/Ethnicity</b>						
<i>Non-Hispanic White</i>	26	35	(27)	32	37	38
<i>African American</i>	20	27	28	28	31	26
<i>Hispanic</i>	29	24	26	22	27	25
<i>All others</i>	29	24	25	25	25	33

\* We performed t-test comparisons between 2011 and 2012 responses for each race/ethnic group. Circles indicate significant differences at the  $p < 0.05$  level.

- In terms of social normative beliefs around consumption of sweetened beverages, CalFresh eligible Whites reported a significant decrease in “most/all” response from 2011 to 2012.
- African American and Hispanic recipients reported significantly lower rates than Whites in the “most/all” category in 2012.

**Exhibit 3.67** Social Normative Beliefs About Supporting Physical Activity: “How many mothers you know make it easy for their children to be physically active every day? (% Most/All), by Race/Ethnicity

Social Normative Beliefs about Supporting Physical Activity, “How many mothers you know make it easy for their children to be physically active every day?” (% Most/All), by Race/Ethnicity						
	CalFresh Eligibles			CalFresh Recipients		
	2010	2011	2012	2010	2011	2012
N Unweighted	959	1049	992	1008	997	1026
	%	%	%	%	%	%
<b>Total</b>	<b>37</b>	<b>40</b>	<b>37</b>	<b>32</b>	<b>39</b>	<b>43</b>
<b>Race/Ethnicity</b>						
<i>Non-Hispanic White</i>	39	48	48	49	46	54
<i>African American</i>	37	39	42	34	44	44
<i>Hispanic</i>	35	36	36	25	34	38
<i>All others</i>	45	39	25	37	41	36

\* We performed t-test comparisons between 2011 and 2012 responses for each race/ethnic group. There were no significant differences at the p<0.05 level.

- In terms of social normative beliefs around physical activity, CalFresh eligibles and recipients reported decreases in agreement from 2011 to 2012, but these overall decreases were not statistically significant.
- African American, Hispanic and “all other” recipients reported significantly lower rates than Whites in the “most/all” category in 2012.
- Hispanic and “all other” eligibles also reported significantly lower rates than Whites in the “most/all” category in 2012.

**Exhibit 3.68** Social Normative Beliefs About Supporting Physical Activity: “How many mothers you know set limits on the amount of TV their children watch each day? (% Most/All), by Race/Ethnicity

Social Normative Beliefs about Supporting Physical Activity, “How many mothers you know set limits on the amount of TV their children watch each day?” (% Most/All), by Race/Ethnicity						
	CalFresh Eligibles			CalFresh Recipients		
	2010	2011	2012	2010	2011	2012
N Unweighted	958	1049	991	1008	999	1026
	%	%	%	%	%	%
<b>Total</b>	<b>26</b>	<b>26</b>	<b>27</b>	<b>18</b>	<b>25</b>	<b>27</b>
<b>Race/Ethnicity</b>						
<i>Non-Hispanic White</i>	25	28	28	25	29	33
<i>African American</i>	18	24	26	23	25	24
<i>Hispanic</i>	26	25	27	15	25	23
<i>All others</i>	40	27	28	14	10	29

\* We performed t-test comparisons between 2011 and 2012 responses for each race/ethnic group. Circles indicate significant differences at the  $p < 0.05$  level.

- In terms of social normative beliefs around TV watching, “all other” CalFresh recipients reported a statistically significant increase of 19 percentage points in the “most/all” from 2011 to 2012. All other groups reported mixed results from 2011 to 2012 and none of these differences were statistically significant.
- African American and Hispanic recipients reported significantly lower rates than Whites in the “most/all” category in 2012.

*Social Normative Beliefs: Chronic Disease Risk and Overweight Differences*

The next set of tables display the data on differences by chronic disease risk and overweight status.

The first two tables look at normative support for individual behaviors followed by tables on support for family change behaviors.

**Exhibit 3.69** Social Normative Beliefs About Meeting Recommendations: “How many people you know eat enough fruits and vegetables every day? (% Most/All), by Risk and Overweight

Social Normative Beliefs about Meeting Recommendations, "How many people you know eat enough fruit and vegetables every day?" (% Most/All), by Risk and Overweight*		
	CalFresh Eligible Mothers	CalFresh Recipients
	2012	2012
N Unweighted	993	1026
	%	%
High Risk	29	37
Low Risk	31	38
Overweight	(27)	36
Not Overweight	33	38

\* Risk and Overweight sub-group analyses were added in 2012. Respondents were categorized as "high risk" if they affirmed that they, or anyone in their immediate family, had ever been told they have type-2 diabetes, heart disease, or high blood pressure. Respondents were identified as overweight if their BMI met or exceeded 25.0, in accordance with CDC guidelines.

° We performed t-test comparisons between responses for high and low risk groups as well as overweight and not overweight groups within audience type. Circles indicate significant differences at the  $p < 0.05$  level.

- High risk CalFresh recipient and eligible mothers reported lower percentages of “most/all” responses than low risk mothers in 2012. These differences were not statistically significant.
- Overweight CalFresh recipient and eligible mothers reported lower percentages of “most/all” responses than their counterparts. This difference was significant for eligibles only.



**Exhibit 3.70** Social Normative Beliefs About Meeting Recommendations: “How many people you know are physically active every day? (% Most/All), by Risk and Overweight

Social Normative Beliefs about Meeting Recommendations, "How many people you know are physically active every day?" (% Most/All), by Risk and Overweight		
	CalFresh Eligible Mothers	CalFresh Recipients
	2012	2012
N Unweighted	992	1026
	%	%
High Risk	29	28
Low Risk	30	34
Overweight	27	27
Not Overweight	32	31

\* Risk and Overweight sub-group analyses were added in 2012. Respondents were categorized as "high risk" if they affirmed that they, or anyone in their immediate family, had ever been told they have type-2 diabetes, heart disease, or high blood pressure. Respondents were identified as overweight if their BMI met or exceeded 25.0, in accordance with CDC guidelines.

° We performed t-test comparisons between responses for high and low risk groups as well as overweight and not overweight groups within audience type. There were no significant differences at the  $p < 0.05$  level.

- High risk CalFresh recipient and eligible mothers reported lower percentages of “most/all” responses than low risk mothers in 2012. These differences were not statistically significant.
- Overweight CalFresh recipient and eligible mothers reported lower percentages of “most/all” responses than their counterparts. These differences were not statistically significant.

**Exhibit 3.71** Social Normative Beliefs About Supporting Fruit and Vegetable Consumption: “How many mothers you know make it easy for their children to eat fruits and vegetables every day? (% Most/All), by Risk and Overweight

Social Normative Beliefs about Supporting Fruit and Vegetable Consumption, "How many mothers you know make it easy for their children to eat fruits and vegetables every day?" (%Most/All), by Risk and Overweight		
	CalFresh Eligible Mothers	CalFresh Recipients
	2012	2012
N Unweighted	993	1026
	%	%
High Risk	31	39
Low Risk	30	37
Overweight	28	38
Not Overweight	33	40

\* Risk and Overweight sub-group analyses were added in 2012. Respondents were categorized as "high risk" if they affirmed that they, or anyone in their immediate family, had ever been told they have type-2 diabetes, heart disease, or high blood pressure. Respondents were identified as overweight if their BMI met or exceeded 25.0, in accordance with CDC guidelines.

° We performed t-test comparisons between responses for high and low risk groups as well as overweight and not overweight groups within audience type. There were no significant differences at the  $p < 0.05$  level.

- High risk CalFresh recipient and eligible mothers reported higher percentages of “most/all” responses than low risk mothers in 2012. These differences were not statistically significant.
- Overweight CalFresh recipient and eligible mothers reported lower percentages of “most/all” responses than their counterparts. These differences were not statistically significant.

**Exhibit 3.72** Social Normative Beliefs About Supporting Fruit and Vegetable Consumption  
How many mothers do you know set limits on the amount of unhealthy food they have in the home for their children to snack on?" by Risk and Overweight

Social Normative Beliefs about Supporting Fruit and Vegetable Consumption, "How many mothers you know set limits on the amount of unhealthy food they have in their home for their children to snack on?" (% Most/All), by Risk and Overweight		
	CalFresh Eligible Mothers	CalFresh Recipients
	2012	2012
N Unweighted	992	1026
	%	%
High Risk	26	30
Low Risk	29	32
Overweight	27	31
Not Overweight	28	30

\* Risk and Overweight sub-group analyses were added in 2012. Respondents were categorized as "high risk" if they affirmed that they, or anyone in their immediate family, had ever been told they have type-2 diabetes, heart disease, or high blood pressure. Respondents were identified as overweight if their BMI met or exceeded 25.0, in accordance with CDC guidelines.

° We performed t-test comparisons between responses for high and low risk groups as well as overweight and not overweight groups within audience type. There were no significant differences at the  $p < 0.05$  level.

- High risk CalFresh recipient and eligible mothers reported lower percentages of "most/all" responses than low risk mothers in 2012. These differences were not statistically significant.
- Overweight CalFresh recipient mothers reported a higher percentage while eligibles reported a lower percentage of "most/all" responses than their counterparts. These differences were not statistically significant.

**Exhibit 3.73** Social Normative Beliefs About Supporting Fruit and Vegetable Consumption  
How many mothers do you know set limits on the amount of sweetened beverages they have in the home for their children to drink?" By Risk and Overweight

Social Normative Beliefs about Supporting Fruit and Vegetable Consumption, "How many mothers you know set limits on the amount of sweetened beverages they have in the home for children to drink?" (% Most/All), by Risk and Overweight		
	CalFresh Eligible Mothers	CalFresh Recipients
	2012	2012
N Unweighted	993	1026
	%	%
High Risk	24	30
Low Risk	29	32
Overweight	26	30
Not Overweight	26	30

\* Risk and Overweight sub-group analyses were added in 2012. Respondents were categorized as "high risk" if they affirmed that they, or anyone in their immediate family, had ever been told they have type-2 diabetes, heart disease, or high blood pressure. Respondents were identified as overweight if their BMI met or exceeded 25.0, in accordance with CDC guidelines.

° We performed t-test comparisons between responses for high and low risk groups as well as overweight and not overweight groups within audience type. There were no significant differences at the  $p < 0.05$  level.

- High risk CalFresh recipient and eligible mothers reported lower percentages of "most/all" responses than low risk mothers in 2012. These differences were not statistically significant.
- There was no difference in rates of social normative beliefs around sweetened beverages between overweight and not overweight recipient or eligible mothers.

**Exhibit 3.74** Social Normative Beliefs About Supporting Physical Activity: “How many mothers you know make it easy for their children to be physically active every day? (% Most/All), by Risk and Overweight

Social Normative Beliefs about Supporting Physical Activity, "How many mothers you know make it easy for their children to be physically active every day?" (% Most/All), by Risk and Overweight		
	CalFresh Eligible Mothers	CalFresh Recipients
	2012	2012
N Unweighted	992	1026
	%	%
High Risk	38	43
Low Risk	35	44
Overweight	37	42
Not Overweight	37	44

\* Risk and Overweight sub-group analyses were added in 2012. Respondents were categorized as "high risk" if they affirmed that they, or anyone in their immediate family, had ever been told they have type-2 diabetes, heart disease, or high blood pressure. Respondents were identified as overweight if their BMI met or exceeded 25.0, in accordance with CDC guidelines.

° We performed t-test comparisons between responses for high and low risk groups as well as overweight and not overweight groups within audience type. There were no significant differences at the  $p < 0.05$  level.

- High risk CalFresh eligible mothers and low risk recipient mothers reported higher percentages of “most/all” responses in 2012. These differences were not statistically significant.
- In terms of weight, there was no difference between eligible mothers. Overweight recipients reported a slightly lower percentage of “most/all” responses, however this difference was not statistically significant.

**Exhibit 3.75** Social Normative Beliefs About Supporting Physical Activity: “How many mothers you know set limits on the amount of TV their children watch each day? (% Most/All), by Risk and Overweight

Social Normative Beliefs about Supporting Physical Activity, "How many mothers you know set limits on the amount of TV their children watch each day?" (% Most/All), by Risk and Overweight		
	CalFresh Eligible Mothers	CalFresh Recipients
	2012	2012
N Unweighted	991	1026
	%	%
High Risk	25	26
Low Risk	31	30
Overweight	28	27
Not Overweight	26	27

\* Risk and Overweight sub-group analyses were added in 2012. Respondents were categorized as "high risk" if they affirmed that they, or anyone in their immediate family, had ever been told they have type-2 diabetes, heart disease, or high blood pressure. Respondents were identified as overweight if their BMI met or exceeded 25.0, in accordance with CDC guidelines.

\* We performed t-test comparisons between responses for high and low risk groups as well as overweight and not overweight groups within audience type. Circles indicate significant differences at the  $p < 0.05$  level.

- In terms of social normative beliefs around TV watching, high risk CalFresh eligible and recipient mothers reported lower percentages of “most/all” responses in 2012. The difference was statistically significant for eligibles only.
- There were no statistically significant differences between overweight and not overweight recipients or eligibles in 2012.

### 3.2.5 Self-Efficacy Beliefs

Self-Efficacy is another primary determinant of health behavior.<sup>8</sup> The Champions for Change brand focuses on empowering mothers to make changes in their families and in their communities. Consistent with this emphasis, one of the major goals of the *Network* campaign is to influence self-efficacy beliefs. Beginning in 2007, we adopted measures developed by University of California– Davis researchers<sup>9</sup> in order to assess self-efficacy related to personal fruit and vegetable consumption. They addressed many of the important constituent behaviors related to overall personal consumption. They did not, however, reference the numerous barriers encountered in the course of daily life. Additionally, they did not measure the intensity of the beliefs, i.e., the degree of confidence about successfully performing the

<sup>8</sup> Shaikh, A.R., Yaroch, A.L., Nebeling, L., Yeh, M., Resnicow, K. Psychosocial Predictors of Fruit and Vegetable Consumption in Adults: A Review of the Literature, *American Journal of Preventive Medicine*, Volume 34, Issue 6, June 2008, Pages 535-543.

<sup>9</sup> Townsend M, Kaiser L. Development of a Tool to Assess Psychosocial Indicators of Fruit and Vegetable Intake for Two Federal Programs. *Journal of Nutrition Education and Behavior* 2005; 37(2):170-84.

behaviors. As a result, the scores seemed inflated. In 2009, to address these concerns, we selected measures based on work done by Helen Henry and colleagues at the University of Minnesota<sup>10</sup> with low-income African American mothers.

Measures for personal physical activity were adopted from the work of Sallis et. al<sup>11</sup> in 2007. These measures have essentially remained unchanged in succeeding years. The Sallis approach assesses two dimensions related to personal physical activity: the ability to “make time for physical activity” and the ability to “stick to a physical activity plan.”

Both the Henry and Sallis approaches allowed us to develop similar scales for self-efficacy related to family change efforts. The individual measures were modeled on the personal change ones and the same methods were used to develop the scaled (composite) variables.<sup>12</sup>

These self-efficacy findings are presented below. The findings related to personal self-efficacy appear first, followed by those related to family change efforts. We report only the scaled measures.

#### *Self-Efficacy Beliefs: Trends*

The first table below presents data on the level of self-efficacy related to personal fruit and vegetable consumption.

Respondents were asked how sure they were that they could do a variety of behaviors on a scale of 1 to 5, 1 being not at all sure and 5 being extremely sure. Questions included:

“How sure are you that you could:

- Eat fruit or vegetables when in a hurry?
- Eat fruit or vegetables as part of your lunch on most days?
- Eat fruit or vegetables when eating away from home?  
Eat Fruit or vegetables for dinner on most days?
- Eat a meal with half your plate full of fruit and vegetables most days?
- Eat other fruit or vegetables when your favorites are not available?”

<sup>10</sup> Henry H, Reimer K, Smith C and Reicks M. Associations of Decisional Balance, Processes of Change, and Self-Efficacy with Stages of Change for Increased Fruit and Vegetable Intake among Low-Income, African American Mothers. *Journal of the American Dietetic Association* 2006; 106:841-9.

<sup>11</sup> Sallis JF, Pinski RB, Grossman RM, Patterson, TL and Nader PR. The development of self-efficacy scales for health-related diet and exercise behaviors. *Health Education Research* 1988; 3: 283-92 <[http://socialmarketing-nutrition.ucdavis.edu/tools/somarkToolsList.php?key\\_m=26](http://socialmarketing-nutrition.ucdavis.edu/tools/somarkToolsList.php?key_m=26)>

<sup>12</sup> Marcus, BH, Eaton, C, Rossi, JS., and Harlow, LL. Self-Efficacy, Decision-Making, and Stages of Change: An Integrative Model of Physical Exercise. *Journal of Applied Social Psychology* 1994;24(6): 489-508.

In order to create a scaled measure, respondents received one point for each “1” response, 2 points for each “2” response and so forth. No points were awarded for “don’t know” responses. We then calculated a mean score for each respondent (from 0-5). A respondent was considered to have “high efficacy” if they had a mean score greater than 4. Respondents with a mean score greater than 3 and up to 4 are in the “medium efficacy” group. Respondents with a mean score of 3 or less comprise the “low efficacy” group.

### Exhibit 3.76 Level of Self-Efficacy Related to Personally Increasing Fruit and Vegetable Consumption

Level of Self-Efficacy Related to Personally Increasing Fruit and Vegetable Consumption*						
	CalFresh Eligible Mothers			CalFresh Recipients		
	2010	2011	2012	2010	2011	2012
N Unweighted	964	1052	993	1010	1000	1026
	%	%	%	%	%	%
High Efficacy (> 4.0 - 5.0)	52	47	46	40	44	51
Medium Efficacy (> 3.0 - 4.0)	31	36	32	40	37	35
Low Efficacy (0 - 3.0)	17	16	22	20	20	14
Mean	3.9	3.9	3.9	3.8	3.8	4.0

\* Respondents were asked how sure they were that they could perform a variety of behaviors related to increasing personal fruit and vegetable consumption. Responses were on a scale of 1 to 5, 1 being "not at all sure" and 5 being "extremely sure." To create a scaled measure, respondents received one point for each "1" response, 2 points for each "2" response and so forth. No points were awarded for "don't know" responses. Mean scores were then calculated for each respondent (from 0 to 5). High efficacy refers to mean scores greater than 4. Respondents with a mean score of 3 or 4 are in the "medium efficacy" group. Respondents with a mean score of 3 or less comprise the "low efficacy" group.

° We performed chi-square test comparisons to test the relationship between self-efficacy beliefs and year for each audience type. Responses of "High Efficacy" were compared to all other response categories for 2011 and 2012. Circles indicate significant differences at the  $p < 0.05$  level. No information is provided on significance of 2010-2011 changes.

- CalFresh recipients reported significantly higher rates of self-efficacy from 2011 to 2012.

The next two tables present the data on personal physical activity. The first presents the data on the “making time” dimension. The second presents the data on the “sticking to a plan” dimension. The Sallis measures ask respondents to assess how confident they are about their ability to initiate and maintain regular physical activity.

Questions related to “making time” for physical activity include:

“How sure are you that you can:

- Set aside time for physical activity when undergoing a stressful life change (e.g., a divorce, death in family or moving)?



- Set aside time for physical activity after a long, tiring day at work?
- Set aside time for physical activity: that is, walking, jogging, swimming, biking, or other continuous activities for at least 2 and a half hours per week?"

Questions about “sticking to a physical activity plan” include:

“How sure are you that you can:

- Set aside time for physical activity when your family is demanding more time from you?
- Set aside time for physical activity even when you have excessive demands at work?
- Set aside time for physical activity when you have chores to attend to?

In developing our scale, respondents were given two points for each “I know I can” response and one point for each “maybe I can” response. Responses were summed and those with a total of between five and six points were categorized as “High Efficacy,” those totaling between three and four points were categorized as “Medium Efficacy,” and those with zero to two points were categorized as “Low Efficacy.”

**Exhibit 3.77** Level of Self-Efficacy Regarding Making Time for Physical Activity

Level of Self-Efficacy Regarding Making Time for Physical Activity*						
	CalFresh Eligible Mothers			CalFresh Recipients		
	2010	2011	2012	2010	2011	2012
N Unweighted	960	1046	987	1008	998	1024
	%	%	%	%	%	%
<b>High Efficacy (5.0 - 6.0)</b>	<b>38</b>	<b>38</b>	<b>(29)</b>	<b>39</b>	<b>41</b>	<b>(54)</b>
Medium Efficacy (3.0 - 4.0)	40	39	43	38	39	34
Low Efficacy (0 - 2.0)	22	23	27	23	19	12
<b>Mean</b>	<b>3.9</b>	<b>3.8</b>	<b>3.5</b>	<b>3.8</b>	<b>4.0</b>	<b>4.4</b>

\* We used a selection of measures developed by Sallis to measure self-efficacy related to making time for physical activity. Questions included: "How sure are you that you can set aside time for physical activity when undergoing a stressful life change?", "How sure are you that you can set aside time for physical activity after a long, tiring day at work?", and "How sure are you that you can set aside time for physical activity; that is walking, jogging, swimming, biking, or other continuous activities for at least 2 and a half hours per week?" Responses of "I know I can" were given two points and responses of "maybe I can" were given one point. Responses were summed. Respondents with between 5 and 6 total points were categorized as "High efficacy". "Medium efficacy" represents respondents with 3 to 4 total points and "Low efficacy" refers to respondents with 0 to 2 points.

° We performed chi-square test comparisons to test the relationship between self-efficacy beliefs and year for each audience type. Responses of "High Efficacy" were compared to all other response categories for 2011 and 2012. Circles indicate significant differences at the  $p < 0.05$  level. No information is provided on significance of 2010-2011 changes.

- CalFresh eligible mothers reported a significantly lower rate of self-efficacy in regards to making time for physical activity in 2012 compared to 2011; less than one-third reported high self-efficacy.
- In contrast, over half of recipients reported high-self efficacy in 2012, which was a significant and positive change over 2011.

**Exhibit 3.78** Level of Self-Efficacy Regarding Sticking to Physical Activity Plan

Level of Self-Efficacy Regarding Sticking to Physical Activity Plan*						
	CalFresh Eligible Mothers			CalFresh Recipients		
	2010	2011	2012	2010	2011	2012
N Unweighted	957	1046	983	1007	996	1024
	%	%	%	%	%	%
<b>High Efficacy (5.0 - 6.0)</b>	<b>41</b>	<b>34</b>	<b>(28)</b>	<b>43</b>	<b>48</b>	<b>(41)</b>
Medium Efficacy (3.0 - 4.0)	34	39	43	38	34	38
Low Efficacy (0 - 2.0)	25	27	29	19	18	21
<b>Mean</b>	<b>3.8</b>	<b>3.6</b>	<b>3.4</b>	<b>4.0</b>	<b>4.1</b>	<b>3.9</b>

\* We used a selection of measures developed by Sallis to measure self-efficacy related to making time for physical activity. Questions included: "How sure are you that you can set aside time for physical activity when your family is demanding more time from you?", "How sure are you that you can set aside time for physical activity when you have excessive demands at work?", and "How sure are you that you can set aside time for physical activity when you have chores to attend to?" Responses of "I know I can" were given two points and responses of "maybe I can" were given one point. Responses were summed. Respondents with between 5 and 6 total points were categorized as "High efficacy". "Medium efficacy" represents respondents with 3 to 4 total points and "Low efficacy" refers to respondents with 0 to 2 points.

° We performed chi-square test comparisons to test the relationship between self-efficacy beliefs and year for each audience type. Responses of "High Efficacy" were compared to all other response categories for 2011 and 2012. Circles indicate significant differences at the  $p < 0.05$  level. No information is provided on significance of 2010-2011 changes.

- CalFresh eligible mothers reported a significantly lower rate of high self-efficacy in regards to sticking to a physical activity plan in 2012 compared to 2011 with less than one-third reporting high self-efficacy.
- CalFresh recipients also reported a significant decrease in high-self efficacy from 2011 to 2012.

The next two tables present the data on self-efficacy related to promoting family change behaviors. The first presents data on self-efficacy related to promoting healthy eating in the family while the second presents data on promoting physical activity in the family.

Questions related to promoting healthy eating in the family include:

“How sure are you that you could:

- Get your family to eat a dinner together at least 5 times a week?
- (Eligibles only) Apply for CalFresh (formerly the Food Stamps program) for your family even if it is something you have never considered before?
- (Recipients only) “Remain on CalFresh as long as your family needs the program?”

Questions related to promoting physical activity in the family include:

“How sure are you that you could:

- Take your children to the park, pool, or other places where they can be physically active even when you are busy with other responsibilities?
- Encourage your children to ride a bike or play outside even when they have other things they want to?
- Do physical activity with your family even when you are tired after a long day at work?
- Set limits on the amount of time your children watch TV each day even if it makes them unhappy?
- Take your children to the park, pool, or other places where they can be physically active even when you are busy with other responsibilities?
- Encourage your children to ride a bike or play outside even when they have other things they want to?
- Do physical activity with your family even when you are tired after a long day at work?
- Set limits on the amount of time your children watch TV each day even if it makes them unhappy?”

Respondents received one point for each “1-Not at all sure” response, 2 points for each “2” response and so forth. No points were awarded for “don’t know” responses. We then calculated a mean score for each respondent (from 0-5). A respondent was considered to have “high efficacy” if they had a mean score greater than 4. Respondents with a mean score greater than 3 and up to 4 are in the “medium efficacy” group. Respondents with a mean score of 3 or less comprise the “low efficacy” group.

### Exhibit 3.79 Level of Self-Efficacy Related to Promoting Healthy Eating in Family

Level of Self-Efficacy Related to Promoting Healthy Eating in Family*						
	CalFresh Eligible Mothers			CalFresh Recipients		
	2010	2011	2012	2010	2011	2012
N Unweighted	964	1052	993	1010	1000	1026
	%	%	%	%	%	%
<b>High Efficacy (&gt; 4.0 - 5.0)</b>	<b>59</b>	<b>60</b>	<b>59</b>	<b>66</b>	<b>72</b>	<b>82</b>
Medium Efficacy (> 3.0 - 4.0)	33	31	27	29	23	16
Low Efficacy (0 - 3.0)	8	8	14	6	5	2
<b>Mean</b>	<b>4.1</b>	<b>4.1</b>	<b>4.1</b>	<b>4.3</b>	<b>4.3</b>	<b>4.5</b>

\* Respondents were asked how sure they were that they could perform a variety of behaviors related to promoting healthy eating in their family. Responses were on a scale of 1 to 5, 1 being "not at all sure" and 5 being "extremely sure." To create a scaled measure, respondents received one point for each "1" response, 2 points for each "2" response and so forth. No points were awarded for "don't know" responses. Mean scores were then calculated for each respondent (from 0 to 5). High efficacy refers to

mean scores greater than 4. Respondents with a mean score of 3 or 4 are in the "medium efficacy" group. Respondents with a mean score of 3 or less comprise the "low efficacy" group.

° We performed chi-square test comparisons to test the relationship between self-efficacy beliefs and year for each audience type. Responses of "High Efficacy" were compared to all other response categories for 2011 and 2012. Circles indicate significant differences at the  $p < 0.05$  level. No information is provided on significance of 2010-2011 changes.

- Overall, *Network* audiences are more confident of their ability to promote family changes than personal changes.
- A majority of mothers in both audiences displayed high levels of efficacy. CalFresh recipients reported a significantly higher rate of self-efficacy in regards to promoting healthy eating for their family in 2012 compared to 2011.

### Exhibit 3.80 Level of Self-Efficacy Related to Promoting Physical Activity in Family

Level of Self-Efficacy Related to Promoting Physical Activity in Family*						
	CalFresh Eligible Mothers			CalFresh Recipients		
	2010	2011	2012	2010	2011	2012
N Unweighted	964	1052	993	1010	1000	1026
	%	%	%	%	%	%
<b>High Efficacy (&gt; 4.0 - 5.0)</b>	<b>59</b>	<b>60</b>	<b>56</b>	<b>43</b>	<b>53</b>	<b>52</b>
Medium Efficacy (> 3.0 - 4.0)	28	27	26	39	34	34
Low Efficacy (0 - 3.0)	13	14	18	17	13	14
<b>Mean</b>	<b>4.2</b>	<b>4.2</b>	<b>4.1</b>	<b>3.9</b>	<b>4.1</b>	<b>4.1</b>

\* Respondents were asked how sure they were that they could perform a variety of behaviors related to promoting physical activity in their family. Responses were on a scale of 1 to 5, 1 being "not at all sure" and 5 being "extremely sure." To create a scaled measure, respondents received one point for each "1" response, 2 points for each "2" response and so forth. No points were awarded for "don't know" responses. Mean scores were then calculated for each respondent (from 0 to 5). High efficacy refers to mean scores greater than 4. Respondents with a mean score of 3 or 4 are in the "medium efficacy" group. Respondents with a mean score of 3 or less comprise the "low efficacy" group.

° We performed chi-square test comparisons to test the relationship between self-efficacy beliefs and year for each audience type. Responses of "High Efficacy" were compared to all other response categories for 2011 and 2012. There were no significant differences at the  $p < 0.05$  level. No information is provided on significance of 2010-2011 changes.

- Over half of CalFresh eligibles and recipients reported high self-efficacy with regard to promoting physical activity for their family. Both eligibles and recipients remained stable over time with no significant differences for either group from 2011 to 2012.

#### Self-Efficacy Beliefs: Race/Ethnic Differences

Data on self-efficacy for race/ethnic groups are presented below.

**Exhibit 3.81** Level of Self-Efficacy Related to Personally Increasing Fruit and Vegetable Consumption by Race/Ethnicity (% High Efficacy)

Level of Self-Efficacy Related to Personally Increasing Fruit and Vegetable Consumption, by Race/Ethnicity (% High Efficacy)						
	CalFresh Eligibles			CalFresh Recipients		
	2010	2011	2012	2010	2011	2012
N Unweighted	963	1052	993	1010	1000	1026
	%	%	%	%	%	%
<b>Total</b>	<b>52</b>	<b>47</b>	<b>46</b>	<b>40</b>	<b>44</b>	<b>51</b>
<b>Race/Ethnicity</b>						
<i>Non-Hispanic White</i>	55	50	55	58	55	56
<i>African American</i>	55	49	50	41	44	55
<i>Hispanic</i>	48	44	42	35	36	43
<i>All others</i>	61	54	57	47	63	56

\* We performed t-test comparisons between 2011 and 2012 responses for each race/ethnic group. Circles indicate significant differences at the  $p < 0.05$  level.

- Hispanic CalFresh recipients were significantly more likely to feel highly efficacious around increasing fruit and vegetable consumption in 2012 compared to 2011.
- Compared to Whites, Hispanic eligibles and recipients were significantly less likely to feel highly efficacious in 2012.

**Exhibit 3.82** Level of Self-Efficacy Regarding Making Time for Physical Activity, by Race/Ethnicity (% High Efficacy)

Level of Self-Efficacy Regarding Making Time for Physical Activity, by Race/Ethnicity (% High Efficacy)						
	CalFresh Eligibles			CalFresh Recipients		
	2010	2011	2012	2010	2011	2012
N Unweighted	960	1046	987	1008	998	1024
	%	%	%	%	%	%
<b>Total</b>	<b>38</b>	<b>38</b>	<b>29</b>	<b>39</b>	<b>41</b>	<b>54</b>
<b>Race/Ethnicity</b>						
<i>Non-Hispanic White</i>	39	43	30	41	40	49
<i>African American</i>	40	37	35	41	40	56
<i>Hispanic</i>	37	36	28	39	43	60
<i>All others</i>	41	42	30	31	40	49

\* We performed t-test comparisons between 2011 and 2012 responses for each race/ethnic group. Circles indicate significant differences at the  $p < 0.05$  level.

- White, African American and Hispanic CalFresh recipients reported significantly higher rates of high self-efficacy around making time for physical activity from 2011 to 2012.
- In contrast, all CalFresh eligibles race/ethnic groups felt less highly efficacious from 2011 to 2012, with White and Hispanic eligibles feeling significantly less so.
- Compared to Whites, Hispanic recipients were significantly less likely to feel highly efficacious in 2012.

**Exhibit 3.83** Level of Self-Efficacy Regarding Sticking to Physical Activity Plan, by Race/Ethnicity (% High Efficacy)

Level of Self-Efficacy Regarding Sticking to Physical Activity Plan, by Race/Ethnicity (% High Efficacy)						
	CalFresh Eligibles			CalFresh Recipients		
	2010	2011	2012	2010	2011	2012
N Unweighted	957	1046	983	1007	996	1024
	%	%	%	%	%	%
<b>Total</b>	<b>41</b>	<b>34</b>	<b>28</b>	<b>43</b>	<b>48</b>	<b>41</b>
<b>Race/Ethnicity</b>						
<i>Non-Hispanic White</i>	38	37	31	41	39	40
<i>African American</i>	44	38	33	44	43	45
<i>Hispanic</i>	40	30	26	44	54	40
<i>All others</i>	46	44	30	41	46	38

\* We performed t-test comparisons between 2011 and 2012 responses for each race/ethnic group. Circles indicate significant differences at the  $p < 0.05$  level.

- Overall, CalFresh eligible mothers felt less efficacious about sticking to a physical activity plan in 2012 as compared to 2011, however these differences were not statistically significant. Hispanic recipient mothers were the only race/ethnic group that felt significantly less efficacious in 2012 over 2011.
- There were no significant differences for eligibles or recipients between whites and any other race/ethnic minority group in 2012.



**Exhibit 3.84** Level of Self-Efficacy Related to Family Change Behaviors to Support Healthy Eating, by Race/Ethnicity (% High Efficacy)

Level of Self-Efficacy Related to Family Change Behaviors to Support Healthy Eating, by Race/Ethnicity (% High Efficacy)						
	CalFresh Eligibles			CalFresh Recipients		
	2010	2011	2012	2010	2011	2012
N Unweighted	964	1049	993	985	995	1023
	%	%	%	%	%	%
<b>Total</b>	<b>59</b>	<b>60</b>	<b>59</b>	<b>66</b>	<b>72</b>	<b>82</b>
<b>Race/Ethnicity</b>						
<i>Non-Hispanic White</i>	61	63	60	73	76	87
<i>African American</i>	63	59	58	65	68	81
<i>Hispanic</i>	56	59	58	63	70	79
<i>All others</i>	61	62	66	67	78	81

\* We performed t-test comparisons between 2011 and 2012 responses for each race/ethnic group. Circles indicate significant differences at the  $p < 0.05$  level.

- White, Hispanic, and African American CalFresh recipients felt significantly more efficacious about family change behaviors around healthy eating in 2012 over 2011.
- In contrast, White, Hispanic, and African American eligibles felt less highly efficacious in 2012 over, however these differences were not statistically significant.
- In 2012, Hispanic recipients were significantly less likely to feel highly efficacious than Whites.

**Exhibit 3.85** Level of Self-Efficacy Related to Family Change Behaviors to Support Physical Activity, by Race/Ethnicity (% High Efficacy)

Level of Self-Efficacy Related to Family Change Behaviors to Support Physical Activity, by Race/Ethnicity (% High Efficacy)						
	CalFresh Eligibles			CalFresh Recipients		
	2010	2011	2012	2010	2011	2012
N Unweighted	964	1052	993	1010	1000	1026
	%	%	%	%	%	%
<b>Total</b>	<b>59</b>	<b>60</b>	<b>56</b>	<b>43</b>	<b>53</b>	<b>52</b>
<b>Race/Ethnicity</b>						
<i>Non-Hispanic White</i>	56	61	56	51	56	55
<i>African American</i>	62	56	57	52	59	49
<i>Hispanic</i>	59	59	54	40	51	53
<i>All others</i>	62	66	66	43	53	51

\* We performed t-test comparisons between 2011 and 2012 responses for each race/ethnic group. There were no significant differences at the  $p < 0.05$  level.

- There were no significant differences for CalFresh eligibles or recipients in reported self-efficacy around family change behaviors to support physical activity from 2011 to 2012.
- In 2012, there were no significant differences between white and any other race/ethnic minority group.

*Self-Efficacy Beliefs: Chronic Disease Risk and Overweight Differences*

Subgroup analyses on self-efficacy by chronic disease risk and overweight status are presented below:

**Exhibit 3.86** Level of Self-Efficacy Related to Personally Increasing Fruit and Vegetable Consumption by Risk and Overweight (% High Efficacy)

Level of Self-Efficacy Related to Personally Increasing Fruit and Vegetable Consumption, by Risk and Overweight (% High Efficacy)		
	CalFresh Eligible Mothers	CalFresh Recipients
	2012	2012
N Unweighted	993	1026
	%	%
High Risk	46	52
Low Risk	47	49
Overweight	48	(48)
Not Overweight	44	57

\* Risk and Overweight sub-group analyses were added in 2012. Respondents were categorized as "high risk" if they affirmed that they, or anyone in their immediate family, had ever been told they have type-2 diabetes, heart disease, or high blood pressure. Respondents were identified as overweight if their BMI met or exceeded 25.0, in accordance with CDC guidelines.

° We performed t-test comparisons between responses for high and low risk groups as well as overweight and not overweight groups within audience type. Circles indicate significant differences at the  $p < 0.05$  level.

- In terms of risk, there were no significant differences between high and low risk groups for CalFresh eligibles or recipients with regard to personal fruit and vegetable consumption.
- Overweight CalFresh recipients reported significantly lower rates of high self-efficacy than their not overweight counterparts in 2012. \

**Exhibit 3.87** Level of Self-Efficacy Regarding Making Time for Physical Activity, by Risk and Overweight (% High Efficacy)

Level of Self-Efficacy Regarding Making Time for Physical Activity, by Risk and Overweight (% High Efficacy)		
	CalFresh Eligible Mothers	CalFresh Recipients
	<b>2012</b>	<b>2012</b>
N Unweighted	987	1024
	%	%
High Risk	29	53
Low Risk	29	58
Overweight	(33)	55
Not Overweight	25	53

\* Risk and Overweight sub-group analyses were added in 2012. Respondents were categorized as "high risk" if they affirmed that they, or anyone in their immediate family, had ever been told they have type-2 diabetes, heart disease, or high blood pressure. Respondents were identified as overweight if their BMI met or exceeded 25.0, in accordance with CDC guidelines.

° We performed t-test comparisons between responses for high and low risk groups as well as overweight and not overweight groups within audience type. Circles indicate significant differences at the  $p < 0.05$  level.

- There were no significant differences between the high or low risk eligible or recipient mothers on efficacy related to making time for physical activity.
- Overweight CalFresh eligibles reported significantly higher rates of efficacy than their not overweight counterparts.
- For both the risk and weight groups, over half of recipients reported high efficacy whereas just one-third of eligibles did so.

**Exhibit 3.88** Level of Self-Efficacy Regarding Sticking to Physical Activity Plan, by Risk and Overweight (% High Efficacy)

Level of Self-Efficacy Regarding Sticking to Physical Activity Plan, by Risk and Overweight (% High Efficacy)		
	CalFresh Eligible Mothers	CalFresh Recipients
	<b>2012</b>	<b>2012</b>
N Unweighted	983	1024
	%	%
High Risk	27	41
Low Risk	29	40
Overweight	27	40
Not Overweight	29	42

\* Risk and Overweight sub-group analyses were added in 2012. Respondents were categorized as "high risk" if they affirmed that they, or anyone in their immediate family, had ever been told they have type-2 diabetes, heart disease, or high blood pressure. Respondents were identified as overweight if their BMI met or exceeded 25.0, in accordance with CDC guidelines.

° We performed t-test comparisons between responses for high and low risk groups as well as overweight and not overweight groups within audience type. There were no significant differences at the  $p < 0.05$  level.

- There were no significant differences between groups related to sticking to a physical activity plan.
- Approximately 40% of CalFresh recipients across risk and weight groups reported high efficacy whereas just over one-quarter of eligibles across risk and weight groups did so.

**Exhibit 3.89** Level of Self-Efficacy Related to Family Change Behaviors to Support Healthy Eating, by Risk and Overweight (% High Efficacy)

Level of Self-Efficacy Related to Family Change Behaviors to Support Healthy Eating, by Risk and Overweight (% High Efficacy)		
	CalFresh Eligible Mothers	CalFresh Recipients
	<b>2012</b>	<b>2012</b>
N Unweighted	993	1026
	%	%
High Risk	61	81
Low Risk	56	83
Overweight	61	82
Not Overweight	57	81

\* Risk and Overweight sub-group analyses were added in 2012. Respondents were categorized as "high risk" if they affirmed that they, or anyone in their immediate family, had ever been told they have type-2 diabetes, heart disease, or high blood pressure. Respondents were identified as overweight if their BMI met or exceeded 25.0, in accordance with CDC guidelines.

° We performed t-test comparisons between responses for high and low risk groups as well as overweight and not overweight groups within audience type. There were no significant differences at the  $p < 0.05$  level.

- There were no significant differences between CalFresh eligibles or recipients on efficacy related to family change behaviors to support healthy eating.
- Approximately 80% of recipients across both risk and weight groups reported high efficacy. The majority of eligibles in both risk and overweight groups also did so.

**Exhibit 3.90** Level of Self-Efficacy Related to Family Change Behaviors to Support Physical Activity, by Risk and Overweight (% High Efficacy)

Level of Self-Efficacy Related to Family Change Behaviors to Support Physical Activity, by Risk and Overweight (% High Efficacy)		
	CalFresh Eligible Mothers	CalFresh Recipients
	2012	2012
N Unweighted	993	1026
	%	%
High Risk	56	51
Low Risk	56	57
Overweight	57	50
Not Overweight	55	55

\* Risk and Overweight sub-group analyses were added in 2012. Respondents were categorized as "high risk" if they affirmed that they, or anyone in their immediate family, had ever been told they have type-2 diabetes, heart disease, or high blood pressure. Respondents were identified as overweight if their BMI met or exceeded 25.0, in accordance with CDC guidelines.

° We performed t-test comparisons between responses for high and low risk groups as well as overweight and not overweight groups within audience type. There were no significant differences at the  $p < 0.05$  level.

- There were no significant differences between CalFresh eligibles or recipients on efficacy related to family change behaviors to support physical activity.
- The majority of recipients and eligibles in both risk and weight groups reported high efficacy.

### 3.2.6 Barriers to Adopting Recommended Behaviors

This section presents data on beliefs about barriers to fruit and vegetable consumption and physical activity.

#### *Perceived Barriers: Trends*

The data presented below illustrate that ability to find fresh fruit and vegetables is not a big barrier to increased fruit and vegetable consumption among CalFresh recipient and eligible mothers. With regard to physical activity, ability to find places to be physically active is not a barrier for most respondents.

**Exhibit 3.91** Perceived Barriers to Eating Fruit and Vegetables, Agreement that "I can't find good, fresh fruit and vegetables in my neighborhood"

Perceived Barriers to Eating Fruit and Vegetables, Agreement that "I can't find good, fresh fruit and vegetables in my neighborhood"						
	CalFresh Eligible Mothers			CalFresh Recipients		
	2010	2011	2012	2010	2011	2012
N Unweighted	961	1052	992	1010	999	1026
	%	%	%	%	%	%
<b>Agree (net)</b>	<b>14</b>	<b>15</b>	<b>17</b>	<b>19</b>	<b>16</b>	<b>19</b>
<i>Strongly agree</i>	4	6	4	12	9	12
<i>Somewhat agree</i>	10	9	13	6	7	7
<b>Disagree/Neither (net)</b>	<b>86</b>	<b>85</b>	<b>83</b>	<b>81</b>	<b>84</b>	<b>81</b>
<b>Don't Know</b>	<b>0</b>	<b>1</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>

° We performed chi-square test comparisons to test the relationship between perceived barriers and year for each audience type. Responses of "Agree" were compared to all other response categories for 2011 and 2012. There were no significant differences at the  $p < 0.05$  level. No information is provided on significance of 2010-2011 changes.

- From 2010 to 2012, over 80% of CalFresh eligibles and recipients disagreed that access to fresh produce is a barrier.
- There were no significant differences for eligibles or recipients in rates of disagreement from 2011 to 2012.



### Exhibit 3.92 Perceived Barriers to Physical Activity, Agreement that "I can't find places to be physically active"

Perceived Barriers to Physical Activity, Agreement that "I can't find places to be physically active"						
	CalFresh Eligible Mothers			CalFresh Recipients		
	2010	2011	2012	2010	2011	2012
N Unweighted	963	1051	991	1010	998	1026
	%	%	%	%	%	%
<b>Agree (net)</b>	<b>15</b>	<b>14</b>	<b>13</b>	<b>14</b>	<b>13</b>	<b>16</b>
<i>Strongly agree</i>	7	5	5	9	8	10
<i>Somewhat agree</i>	9	9	9	5	5	6
<b>Disagree/Neither (net)</b>	<b>84</b>	<b>85</b>	<b>86</b>	<b>86</b>	<b>86</b>	<b>84</b>
<b>Don't Know</b>	<b>1</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

° We performed chi-square test comparisons to test the relationship between perceived barriers and year for each audience type. Responses of "Agree" were compared to all other response categories for 2011 and 2012. There were no significant differences at the p<0.05 level. No information is provided on significance of 2010-2011 changes.

- From 2010 to 2012, over 80% of CalFresh eligibles and recipients disagreed that access to places to participate in physical activity is a barrier.
- There were no significant differences for eligibles or recipients in rates of disagreement from 2011 to 2012.

## 3.3 Behaviors

The following sections present the data on fruit and vegetable consumption, physical activity, and family change behaviors that support healthy home environments and lifestyles.

### 3.3.1 Fruit and Vegetable Consumption

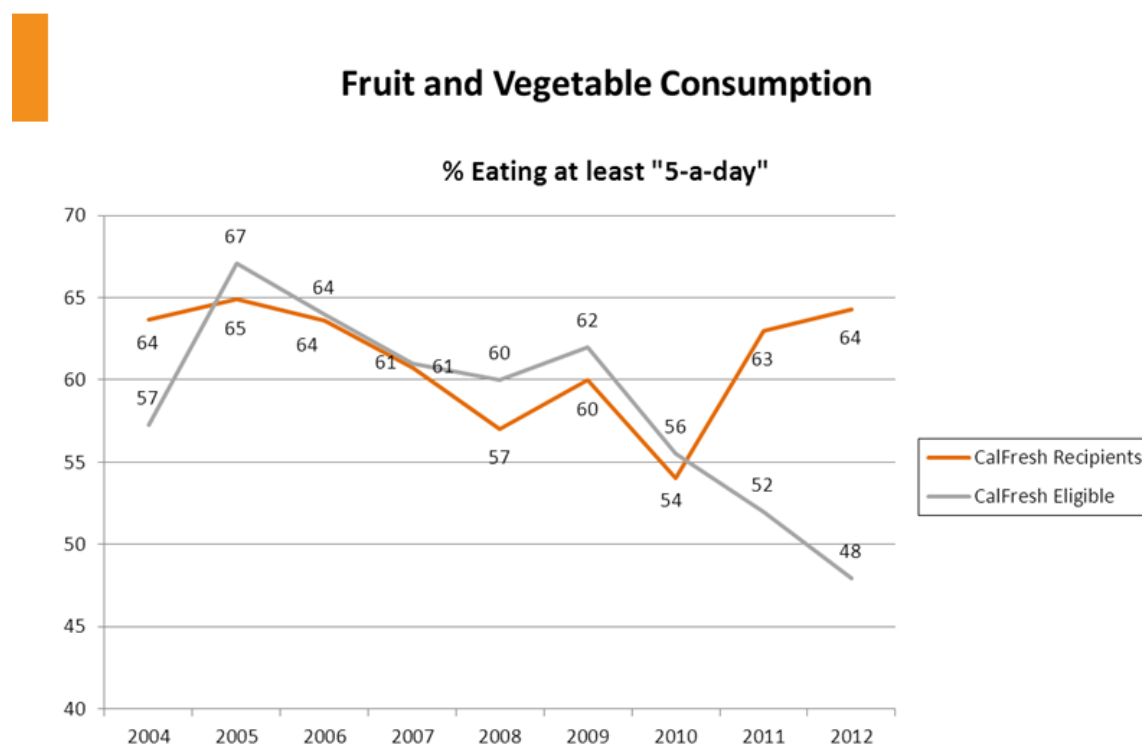
Individual fruit and vegetable consumption is the first behavior discussed. To collect consumption data we used a measure from the CDC's Behavioral Risk Factor Surveillance Survey (BRFSS). The question asks how often respondents eat various types of fruit and vegetables. BRFSS has provided a formula to convert these responses into a daily number of cups and servings.

#### *Fruit and Vegetable Consumption: Trend Tables*

We have analyzed the consumption data in three ways. The first figure below provides data on how many respondents reported eating at least five servings of fruit and vegetables every day for each year of

the study. This allows us to look at how consumption has changed over the longest period of time. Second, we wanted to look at the percentage of respondents who are meeting the current dietary recommendation. For 2007-2010, the recommendation was 3.5-5.0 cups per day. For 2011 and 2012, it is one-half plate at meals. Because we cannot convert responses from the survey food intake measures into plate proportions we have opted to use the 2007-2010 cups measure as our second trend variable in 2011. These data are presented in the second table below. Finally, we show self-reported differences in fruit and vegetable consumption over the past year for 2010-2012 as well as the percentage of respondents meeting the half plate recommendation in 2012.

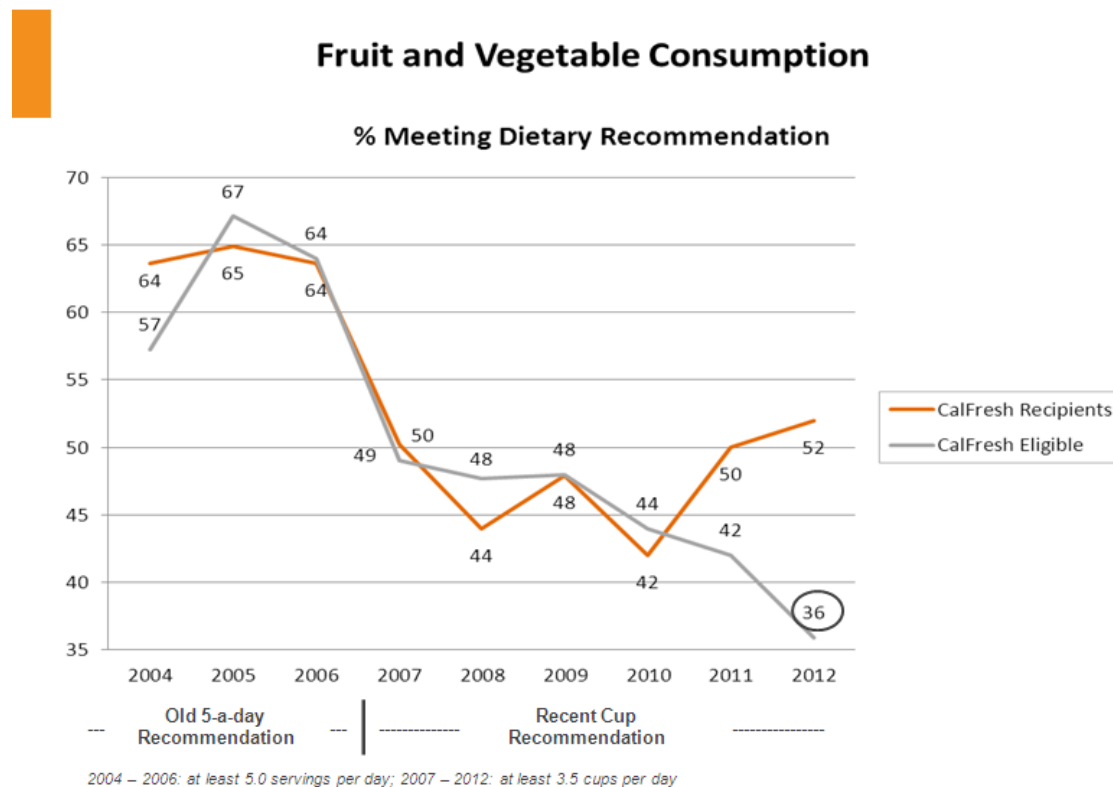
**Exhibit 3.93** Fruit and Vegetable Consumption ( % Eating at least " 5-a-day")



° We performed t-test comparisons between 2011 and 2012 responses for each audience type. There were no significant differences at the  $p < 0.05$  level.

- In terms of the 5-a-day measure, fruit and vegetable consumption has been relatively stable until 2011. In 2011, CalFresh recipients showed a steep increase in consumption, which was sustained in 2012. In contrast, eligibles reported a consistent decline from 2009 until 2012.
- There were no significant differences in rates between 2011 and 2012 for eligibles or recipients.

**Exhibit 3.94** Fruit and Vegetable Consumption (% Meeting Dietary Recommendation)



° We performed t-test comparisons between 2011 and 2012 responses for each audience type. There were no significant differences at the  $p < 0.05$  level.

- The figure above displays the data on the proportion of the two audiences meeting the 3.5.-5.0 cups consumption recommendation.
- From 2011 to 2012 there was an increase for recipients, however this increase was not statistically significant. For eligibles, there was a statistically significant decrease in reported consumption from 2011 to 2012.

**Exhibit 3.95** Self-Reported Differences in Fruit and Vegetable Consumption Over Last Year

Self-Reported Differences in Fruit and Vegetable Consumption Over Last Year						
	CalFresh Eligible Mothers			CalFresh Recipients		
	2010	2011	2012	2010	2011	2012
N Unweighted	964	1049	993	1010	1000	1026
	%	%	%	%	%	%
<b>"Compared to one year ago, are you eating more fruit, less, or about the same?"</b>						
<i>More</i>	53	47	43	51	48	53
<i>Less</i>	12	11	12	12	12	9
<i>About the Same</i>	34	41	45	36	41	38
<i>Don't Know</i>	1	0	0	0	0	0
<b>"Compared to one year ago, are you eating more vegetables, less, or about the same?"</b>						
<i>More</i>	53	47	43	56	52	55
<i>Less</i>	11	10	10	6	8	6
<i>About the Same</i>	35	42	47	38	40	40
<i>Don't Know</i>	0	0	0	0	0	0

° We performed chi-square test comparisons to test the relationship between fruit and vegetable consumption and year for each audience type. Responses of "More" were compared to all other response categories for 2011 and 2012. Circles indicate significant differences at the  $p < 0.05$  level. No information is provided on significance of 2010-2011 changes.

- Self-reported rates of fruit and vegetable consumption have remained fairly consistent over time.
- CalFresh recipients reported significantly higher rates of "more" fruit consumption in 2012 over 2011.
- No significant differences were observed for vegetable consumption among recipients or eligibles.

**Exhibit 3.96** How Much of Plate is Filled with Fruit and Vegetables at Mealtimes

<b>How Much of Plate is Filled with Fruit and Vegetables at Mealtimes*</b>		
	<b>CalFresh Eligible Mothers</b>	<b>CalFresh Recipients</b>
	<b>2012</b>	<b>2012</b>
N Unweighted	993	1026
	%	%
<b>Half Plate or More (net)</b>	<b>38</b>	<b>56**</b>
<i>Half of the Plate</i>	29	38
<i>Three Fourths of the Plate</i>	7	17
<i>All of the Plate</i>	1	2
<b>Less than Half Plate (net)</b>	<b>62</b>	<b>44</b>
<i>One Quarter of the Plate</i>	33	22
<i>One Third of the Plate</i>	24	19
<i>None of the Plate</i>	2	2
<i>Don't Know</i>	3	1

\* Question about how much of plate is filled with fruit and vegetables at mealtimes was reworded in 2012 such that 2011 and 2012 responses are not comparable.

\*\* We performed a chi-square test comparison to test the relationship between audience type and whether a respondent is meeting the half plate recommendation. The difference between the percent of recipients and eligibles meeting the half plate recommendation (56% vs. 38%) was significant at the  $p < 0.05$  level.

- This question about how much of the plate is filled with fruit and vegetables at mealtimes was reworded in 2012 and, therefore, results are not comparable between 2011 and 2012. Consequently, we only present results for 2012.
- CalFresh recipients were significantly more likely to report eating a half plate or more of fruit and vegetables at mealtimes than eligibles.

#### *Fruit and Vegetable Consumption: Race/Ethnic Differences*

Race/ethnic differences are presented in the table below. For this analysis we looked at data bearing on the recent cups behavioral recommendation.

**Exhibit 3.97** Meeting Recommendations for Daily Fruit and Vegetable Consumption, by Race/Ethnicity (% Eating at Least 3.5 Cups)

Meeting Recommendation for Daily Fruit and Vegetable Consumption, by Race/Ethnicity (% Eating at Least 3.5 Cups)						
	CalFresh Eligibles			CalFresh Recipients		
	2010	2011	2012	2010	2011	2012
N Unweighted	922	1049	993	944	995	1023
	%	%	%	%	%	%
<b>Total</b>	<b>44</b>	<b>42</b>	<b>36</b>	<b>42</b>	<b>50</b>	<b>52</b>
<b>Race/Ethnicity</b>						
<i>Non-Hispanic White</i>	39	38	35	39	53	46
<i>African American</i>	46	41	35	41	58	56
<i>Hispanic</i>	47	43	36	43	48	53
<i>All others</i>	36	38	35	41	51	53

\* We performed t-test comparisons between 2011 and 2012 responses for each race/ethnic group. Circles indicate significant differences at the  $p < 0.05$  level.

- Overall, CalFresh eligibles in 2012 scored significantly lower than in 2011 on meeting the recommended daily fruit and vegetable consumption levels.
- There were no significant annual changes for any race/ethnic group from 2011 to 2012 and no significant differences between white and any other race/ethnic group in 2012.

**Exhibit 3.98** “Compared to one year ago, are you eating more fruit, less or about the same?” (% More), by Race/Ethnicity

“Compared to one year ago, are you eating more fruit, less, or about the same?” (% More), by Race/Ethnicity						
	CalFresh Eligibles			CalFresh Recipients		
	2010	2011	2012	2010	2011	2012
N Unweighted	964	1049	993	1010	1000	1026
	%	%	%	%	%	%
<b>Total</b>	<b>53</b>	<b>47</b>	<b>43</b>	<b>51</b>	<b>48</b>	<b>53</b>
<b>Race/Ethnicity</b>						
<i>Non-Hispanic White</i>	52	46	42	46	40	42
<i>African American</i>	49	49	44	49	49	59
<i>Hispanic</i>	55	50	45	54	51	61
<i>All others</i>	48	39	36	48	44	45

\* We performed t-test comparisons between 2011 and 2012 responses for each race/ethnic group. Circles indicate significant differences at the  $p < 0.05$  level.

- Hispanic CalFresh recipients and recipients overall reported significantly higher rates of fruit consumption from 2011 to 2012.
- African American and Hispanic recipients reported significantly higher levels of fruit consumption than their White counterparts in 2012.

**Exhibit 3.99** “Compared to one year ago, are you eating more vegetables, less or about the same?” (% More), by Race/Ethnicity

“Compared to one year ago, are you eating more vegetables, less, or about the same?” (% More), by Race/Ethnicity						
	CalFresh Eligibles			CalFresh Recipients		
	2010	2011	2012	2010	2011	2012
N Unweighted	963	1047	993	1010	999	1026
	%	%	%	%	%	%
<b>Total</b>	<b>53</b>	<b>47</b>	<b>43</b>	<b>56</b>	<b>52</b>	<b>55</b>
<b>Race/Ethnicity</b>						
<i>Non-Hispanic White</i>	54	49	41	51	40	46
<i>African American</i>	49	46	42	47	50	54
<i>Hispanic</i>	54	48	44	59	57	62
<i>All others</i>	48	41	43	53	53	53

\* We performed t-test comparisons between 2011 and 2012 responses for each race/ethnic group. Circles indicate significant differences at the p<0.05 level.

- CalFresh eligibles overall reported significantly lower rates of vegetable consumption while recipients reported significantly higher consumption than in 2011.
- Hispanic recipients reported significantly higher levels of consumption than their White counterparts in 2012.

*Fruit and Vegetable Consumption: Chronic Disease Risk and Overweight Differences*

The following data represent differences in fruit and vegetable consumption by chronic disease risk or overweight status.



**Exhibit 3.100** Meeting Recommendation for Daily Fruit and Vegetable Consumption, by Risk and Overweight (% Eating ½ Plate)

Meeting Recommendation for Daily Fruit and Vegetable Consumption, by Risk and Overweight* (% Eating 1/2 Plate )		
	CalFresh Eligible Mothers	CalFresh Recipients
	<b>2012</b>	<b>2012</b>
N Unweighted	993	1026
	%	%
High Risk	39	55
Low Risk	36	60
Overweight	37	56
Not Overweight	39	57

\* Risk and Overweight sub-group analyses were added in 2012. Respondents were categorized as "high risk" if they affirmed that they, or anyone in their immediate family, had ever been told they have type-2 diabetes, heart disease, or high blood pressure. Respondents were identified as overweight if their BMI met or exceeded 25.0, in accordance with CDC guidelines.

° We performed t-test comparisons between responses for high and low risk groups as well as overweight and not overweight groups within audience type. There were no significant differences at the p<0.05 level.

- There were no significant differences between high and low risk or overweight and not overweight groups within either CalFresh eligible or recipient groups on meeting fruit and vegetable recommendations.
- The majority of recipients in both risk and weight groups reported meeting recommendations. In contrast, just over one-third of eligibles did so.

**Exhibit 3.101** “Compared to one year ago, are you eating more fruit, less, or about the same?” (% More), by Risk and Overweight”

"Compared to one year ago, are you eating more fruit, less, or about the same?" (% More), by Risk and Overweight*		
	CalFresh Eligible Mothers	CalFresh Recipients
	2012	2012
N Unweighted	993	1026
	%	%
High Risk	45	53
Low Risk	41	50
Overweight	45	55
Not Overweight	42	49

\* Risk and Overweight sub-group analyses were added in 2012. Respondents were categorized as "high risk" if they affirmed that they, or anyone in their immediate family, had ever been told they have type-2 diabetes, heart disease, or high blood pressure. Respondents were identified as overweight if their BMI met or exceeded 25.0, in accordance with CDC guidelines.

° We performed t-test comparisons between responses for high and low risk groups as well as overweight and not overweight groups within audience type. Circles indicate significant differences at the  $p < 0.05$  level.

- Overweight CalFresh recipients reported significantly higher rates of eating more fruit in 2012 as compared to their not overweight counterparts.

**Exhibit 3.102** "Compared to one year ago, are you eating more vegetables, less, or about the same?" (% More), by Risk and Overweight

<b>"Compared to one year ago, are you eating more vegetables, less, or about the same?" (% More), by Risk and Overweight*</b>		
	<b>CalFresh Eligible Mothers</b>	<b>CalFresh Recipients</b>
	<b>2012</b>	<b>2012</b>
N Unweighted	993	1026
	%	%
High Risk	43	56
Low Risk	44	51
Overweight	46	(57)
Not Overweight	40	50

\* Risk and Overweight sub-group analyses were added in 2012. Respondents were categorized as "high risk" if they affirmed that they, or anyone in their immediate family, had ever been told they have type-2 diabetes, heart disease, or high blood pressure. Respondents were identified as overweight if their BMI met or exceeded 25.0, in accordance with CDC guidelines.

° We performed t-test comparisons between responses for high and low risk groups as well as overweight and not overweight groups within audience type. Circles indicate significant differences at the  $p < 0.05$  level.

- Overweight CalFresh recipients reported significantly higher rates of eating more vegetables in 2012 as compared to not overweight recipients.

### 3.3.2 Personal Level of Physical Activity

In this section we present data on physical activity levels. To assess physical activity level, respondents are asked a series of questions based on BRFSS measures; they capture the number of days per week a respondent is active and for how many minutes at a time they are active. In order to limit survey length we combined the measures on moderate and vigorous activity.

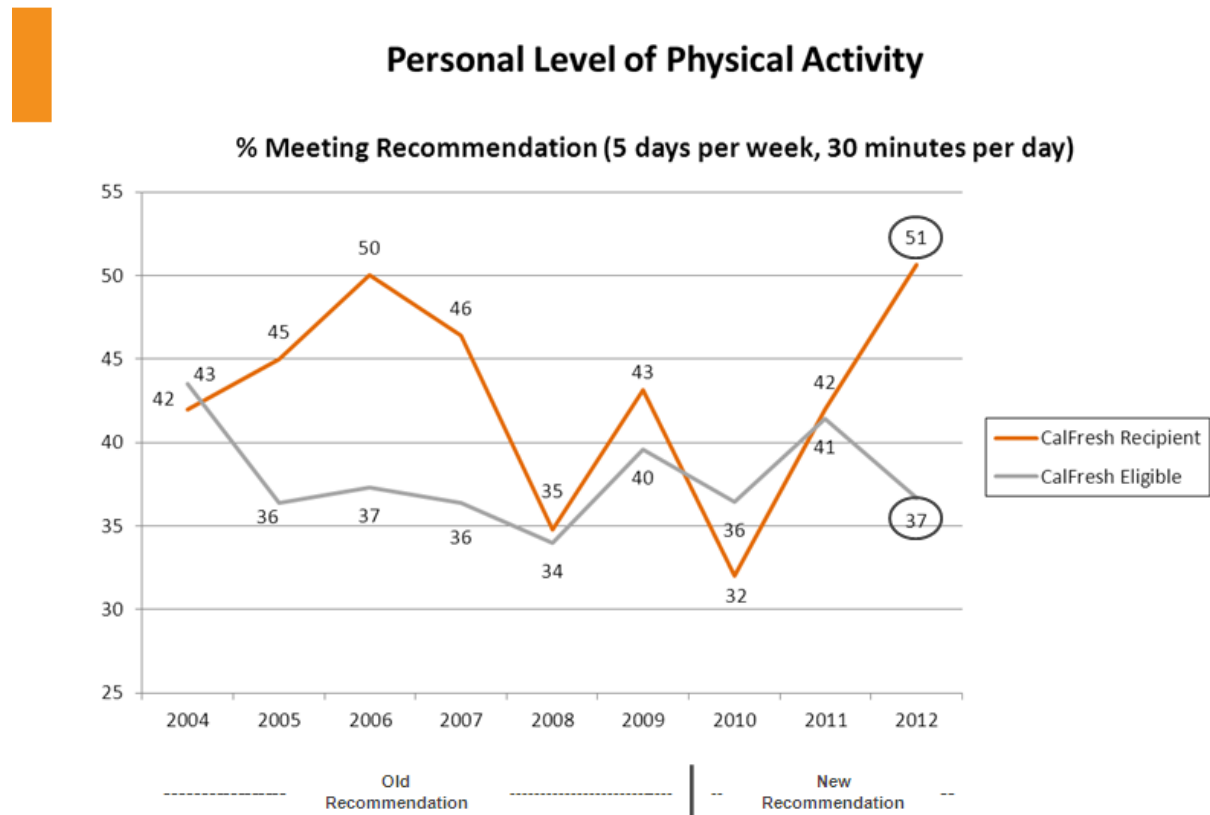
The previous behavioral recommendation was framed in terms of activity at least five days a week for 30 minutes at a time. The new recommendation, commencing in 2010, is for 150 minutes of activity per week, regardless of how many days. We report both measures.

Commencing in 2010, another separate measure for work-related activity was added to examine types physical activity performed within jobs.

#### *Personal Level of Physical Activity: Trend Tables*

Trend data on physical activity are shown below. The physical activity behavior recommendation was framed in terms of activity at least 5 days a week for 30 minutes at a time. The new recommendation, commencing in 2010, is for 150 minutes of activity per week, regardless of many days. The graph below shows the 5 days a week/30 minutes at a time recommendation for 2004 to 2012 for trending purposes.

**Exhibit 3.103** Personal Level of Physical Activity



° We performed chi-square test comparisons to test the relationship between physical activity and year for each audience type. Responses of "Meeting Recommendation" were compared to all other response categories for 2011 and 2012. Circles indicate significant differences at the  $p < 0.05$  level. No information is provided on significance of 2010-2011 changes.

- CalFresh recipients reported a significant increase over 2011 with 51% meeting the recommended level of physical activity in 2012 and a vast increase from 2010, although significance testing was not conducted on the difference between 2010 and 2012.
- In contrast, eligibles reported a significant decrease over 2011 with 37% meeting the recommended level in 2012.

**Exhibit 3.104** Personal Level of Leisure Time Physical Activity, 5 Days Per Week

Personal Level of Leisure Time Physical Activity, 5 Days Per Week*						
	CalFresh Eligible Mothers			CalFresh Recipients		
	2010	2011	2012	2010	2011	2012
N Unweighted	957	1032	981	989	968	1001
	%	%	%	%	%	%
<b>Meeting Recommendation: at least 5 days a week and at least 30 minutes on those days</b>	<b>36</b>	<b>41</b>	<b>(37)</b>	<b>31</b>	<b>41</b>	<b>(51)</b>
At least 5 days a week, but less than 30 minutes at a time	4	5	7	7	6	10
Less than 5 days a week	38	33	32	41	34	22
Not physically active	20	19	23	19	14	15
Don't Know	1	1	1	<1	5	1

\* This table displays personal activity during leisure time according to the 5 times per week/30 minutes per time recommendation, which was replaced in 2010 by the 150 minutes per week recommendation.

° We performed chi-square test comparisons to test the relationship between physical activity and year for each audience type. Responses of "Meeting Recommendation" were compared to all other response categories for 2011 and 2012. Circles indicate significant differences at the  $p < 0.05$  level. No information is provided on significance of 2010-2011 changes.

- CalFresh recipients reported a significant increase over 2011 with 51% meeting the recommended level of leisure time physical activity in 2012.
- In contrast, eligibles reported a significant decrease over 2011 with 37% meeting the recommended level in 2012.

**Exhibit 3.105** Physical Activity During Leisure Time, Performing at Least 150 Minutes Per Week

Personal Activity During Leisure Time, Performing at Least 150 Minutes Per Week*						
	CalFresh Eligible Mothers			CalFresh Recipients		
	2010	2011	2012	2010	2011	2012
N Unweighted	964	1052	993	1010	1000	1026
	%	%	%	%	%	%
<b>150 minutes or more per week</b>	<b>51</b>	<b>54</b>	<b>53</b>	<b>45</b>	<b>53</b>	<b>59</b>
Less than 150 minutes per week	28	24	20	33	29	20
Not at all	20	19	23	19	14	15
Don't Know	1	1	1	0	2	1

\* This table displays personal activity during leisure time according to the 150 minutes per week recommendation, released in 2010.

° We performed chi-square test comparisons to test the relationship between physical activity and year for each audience type. Responses of "150 Minutes or more per week" were compared to all other response categories for 2011 and 2012. Circles indicate significant differences at the  $p < 0.05$  level. No information is provided on significance of 2010-2011 changes.

- CalFresh recipients reported a significant increase over 2011 with 59% 150 minutes or more per week in 2012.

The table below displays work- related physical activity for each audience type. This measure was added in 2010 to account for physical activity performed within physically demanding jobs. Respondents were asked two questions about work-related physical activity:

- “Thinking about what you normally do during a typical work day, not counting your free time, which best describes your activity: Would you say that you sit most of the day, stand most of the day, or walk around a lot?”
- “Again, not counting what you do in your free time, in a typical work day do you usually lift or carry light loads, moderate loads or heavy loads, or do you usually not lift or carry things?”

Points were assigned to each response category for the first work-related physical activity measure as follows: four points assigned to “Walk around”, three points to “Stand”, two points to “Sit”, and one point to “Lays down most of the time.” For the second work-related physical activity measure, four points were assigned to “heavy lifting” responses, three points were assigned to the “moderate lifting” category, two points were assigned to “light lifting” responses, and one point was assigned to any “Do not lift or carry” response. The points assigned for the two questions were then multiplied to create a scaled response. Scaled scores of 15-16 points represented “High” levels of physical activity during work time.

Scores of 7-14 represented “Medium” levels of work-related physical activity and scores of 0-6 represented “Low” levels of physical activity during work time.

### Exhibit 3.106 Physical Activity During Work Time

Physical Activity During Work Time *						
	CalFresh Eligible Mothers			CalFresh Recipients		
	2010	2011	2012	2010	2011	2012
N Unweighted	964	1052	993	1010	1000	1026
	%	%	%	%	%	%
<b>High</b>	<b>5</b>	<b>6</b>	<b>5</b>	<b>6</b>	<b>7</b>	<b>9</b>
Medium	58	51	48	54	53	52
Low	36	40	44	38	33	38
Don't Know	0	0	0	0	0	0

\* Points were assigned based on whether or not respondents reported sitting or laying down, standing, or walking at work, and whether or not the lifted or carried items of light, moderate or heavy weights. Scores from the two question were multiplied and scaled such that scores of 15-16 points represented "High" physical activity during work time, scores of 7-14 represented "medium" levels of physical activity during work time, and scores of 0-6 represented "Low" levels of physical activity during work time.

° We performed chi-square test comparisons to test the relationship between physical activity and year for each audience type. Responses of "High" were compared to all other response categories for 2011 and 2012. There were no significant differences at the p<0.05 level. No information is provided on significance of 2010-2011 changes.

- From 2010 to 2012, less than 10% of CalFresh recipients and eligibles reported engaging in a high level of physical activity during work time. There were no significant differences for either group between 2011 and 2012.

The table below combines work and leisure time physical activity responses. Respondents reporting at least 150 minutes of physical activity per week during leisure time and high levels of physical activity during work time were categorized as “Very Active.” Those categorized as “Active, mostly during leisure time,” reported at least 150 minutes of leisure time physical activity per week and low levels of work-related physical activity. Conversely, respondents in the “Active, mostly during work time” category reported moderate to high levels of work-related physical activity and fewer than 150 minutes of leisure time physical activity per week. “Active, during work and leisure time” refers to those individuals who reported moderate levels of physical activity at work and 150 minutes or more of leisure-time physical activity per week. Finally, respondents who reported fewer than 150 minutes of leisure-time physical activity per week and low levels of physical activity during work time were categorized as “Inactive.”

**Exhibit 3.107** Combined Physical Activity During Work and Leisure Time

<b>Combined Physical Activity During Work and Leisure Time *</b>						
	<b>CalFresh Eligible Mothers</b>			<b>CalFresh Recipients</b>		
	<b>2010</b>	<b>2011</b>	<b>2012</b>	<b>2010</b>	<b>2011</b>	<b>2012</b>
N Unweighted	964	1052	993	1010	1000	1026
	%	%	%	%	%	%
<b>Very Active During Work and Leisure Time</b>	<b>4</b>	<b>5</b>	<b>4</b>	<b>3</b>	<b>4</b>	<b>6</b>
Active, Mostly During Leisure Time	15	21	20	14	20	22
Active, Mostly During Work Time	26	24	20	30	27	23
Active, During Work and Leisure Time	29	26	28	25	27	30
Inactive	22	23	27	25	21	18
Don't Know	0	0	0	0	0	0

\* Very active represents respondents who reported at least 150 minutes of physical activity per week during leisure time and high levels of physical activity during work time. To be active in leisure time, the respondent had to report at least 150 minutes per week of physical activity and report low physical activity at work. To be active at work, the respondent had to report moderate to high levels of work-related physical activity and fewer than 150 minutes of physical activity per week during leisure time. Active during work and leisure time refers to respondents who report 150 minutes or more of physical activity and moderate physical activity at work. Inactive represents respondents who reported fewer than 150 minutes of physical activity per week and low levels of physical activity during work time.

° We performed chi-square test comparisons to test the relationship between physical activity and year for each audience type. Responses of "Very Active" were compared to all other response categories for 2011 and 2012. There were no significant differences at the  $p < 0.05$  level. No information is provided on significance of 2010-2011 changes.

- A small minority of CalFresh recipients and eligibles reported being very active during work and leisure time.



*Personal Level of Physical Activity: Race/Ethnic Differences*

Data on physical activity levels by race/ethnicity are presented below.

**Exhibit 3.108** Meeting Recommendation for Personal Level of Physical Activity, by Race/Ethnicity (% At Least 30 Minutes a Day for 5 Days a Week)

Meeting Recommendation for Personal Level of Physical Activity, by Race/Ethnicity (% At Least 30 Minutes a Day for 5 Days a Week)						
	CalFresh Eligibles			CalFresh Recipients		
	2010	2011	2012	2010	2011	2012
N Unweighted	957	1032	981	989	968	1001
	%	%	%	%	%	%
<b>Total</b>	<b>36</b>	<b>41</b>	<b>37</b>	<b>31</b>	<b>41</b>	<b>51</b>
<b>Race/Ethnicity</b>						
<i>Non-Hispanic White</i>	40	46	44	37	53	53
<i>African American</i>	40	42	41	41	45	54
<i>Hispanic</i>	33	37	36	29	36	50
<i>All others</i>	45	53	25	24	39	46

\* We performed t-test comparisons between 2011 and 2012 responses for each race/ethnic group. Circles indicate significant differences at the  $p < 0.05$  level.

- Overall, CalFresh eligibles reported significantly lower rates of meeting the recommended level of physical activity over 2011. In contrast, recipients reported significantly higher rates of meeting recommended levels over 2011.
- In 2012, Hispanic recipients scored significantly higher than Whites while all other eligibles scored significantly lower than Whites.

**Exhibit 3.109** Meeting Recommendation for Personal Level of Physical Activity, by Race/Ethnicity (% At Least 150 Min a Week)

Meeting Recommendation for Personal Level of Physical Activity, by Race/Ethnicity (% At Least 150 Min a Week)						
	CalFresh Eligibles			CalFresh Recipients		
	2010	2011	2012	2010	2011	2012
N Unweighted	964	1052	993	1010	1000	1026
	%	%	%	%	%	%
<b>Total</b>	<b>51</b>	<b>54</b>	<b>53</b>	<b>45</b>	<b>53</b>	<b>59</b>
<b>Race/Ethnicity</b>						
<i>Non-Hispanic White</i>	53	55	57	53	61	61
<i>African American</i>	51	54	52	54	53	64
<i>Hispanic</i>	49	51	51	41	48	58
<i>All others</i>	57	61	53	40	56	55

\* We performed t-test comparisons between 2011 and 2012 responses for each race/ethnic group. Circles indicate significant differences at the  $p < 0.05$  level.

- Overall, CalFresh recipients reported significantly higher rates of meeting the recommended level of physical activity (150 minutes per week) over 2011. Specifically, Hispanic recipients reported significantly higher rates over 2011.
- In 2012, there were no significant differences between any race/ethnic group and Whites for recipients or eligibles.

*Personal Level of Physical Activity: Chronic Disease Risk and Overweight Differences*

Data on physical activity levels by chronic disease risk and overweight status are presented below.

**Exhibit 3.110** Meeting Recommendation for Personal Level of Physical Activity, by Risk and Overweight (% At Least 30 Minutes a Day for 5 Days a Week)

Meeting Recommendation for Personal Level of Physical Activity, by Risk and Overweight (% At Least 30 Minutes a Day for 5 Days a Week)*		
	CalFresh Eligible Mothers	CalFresh Recipients
	2012	2012
N Unweighted	981	1001
	%	%
High Risk	38	50
Low Risk	34	54
Overweight	35	48
Not Overweight	39	55

\* Risk and Overweight sub-group analyses were added in 2012. Respondents were categorized as "high risk" if they affirmed that they, or anyone in their immediate family, had ever been told they have type-2 diabetes, heart disease, or high blood pressure. Respondents were identified as overweight if their BMI met or exceeded 25.0, in accordance with CDC guidelines.

° We performed t-test comparisons between responses for high and low risk groups as well as overweight and not overweight groups within audience type. Circles indicate significant differences at the  $p < 0.05$  level.

- Overweight CalFresh recipients reported significantly lower rates of meeting the 30 minute per day recommendation for physical activity in 2012 than their not overweight counterparts.

**Exhibit 3.111** Meeting Recommendation for Personal Level of Physical Activity, by Risk and Overweight (% At Least 150 Min a Week)

Meeting Recommendation for Personal Level of Physical Activity, by Risk and Overweight (% At Least 150 Minutes a Week)*		
	CalFresh Eligible Mothers	CalFresh Recipients
	2012	2012
N Unweighted	993	1026
	%	%
High Risk	54	58
Low Risk	50	62
Overweight	52	56
Not Overweight	53	63

\* Risk and Overweight sub-group analyses were added in 2012. Respondents were categorized as "high risk" if they affirmed that they, or anyone in their immediate family, had ever been told they have type-2 diabetes, heart disease, or high blood pressure. Respondents were identified as overweight if their BMI met or exceeded 25.0, in accordance with CDC guidelines.

° We performed t-test comparisons between responses for high and low risk groups as well as overweight and not overweight groups within audience type. Circles indicate significant differences at the  $p < 0.05$  level.

- Overweight CalFresh recipients reported significantly lower rates of meeting the 150 minute per week recommendation for physical activity in 2012 than their not overweight counterparts.

### 3.3.3 Family Change Behaviors

The *Network* campaign seeks to empower mothers to make changes in their families and communities.

To date, much of the campaign focus has been on encouraging family changes to support healthy environments and conditions that prevent obesity. The next section presents these data.

#### *Family Change Behaviors: Trends*

The following tables present the trend data. In general, the results point to positive changes from 2010 to 2012.

**Exhibit 3.112** Family Change Behaviors Promoting Healthy Eating, "How often do you make it easy for children living in your home to eat fruit and vegetables? "

Family Change Behaviors Promoting Healthy Eating, "How often do you make it easy for children living in your home to eat fruit and vegetables?"						
	CalFresh Eligible Mothers			CalFresh Recipients		
	2010	2011	2012	2010	2011	2012
N Unweighted	945	1032	985	1005	992	1018
	%	%	%	%	%	%
<b>Every Day</b>	<b>64</b>	<b>72</b>	<b>65</b>	<b>67</b>	<b>73</b>	<b>75</b>
Every Week	25	20	23	24	20	17
Every Month	4	4	6	4	3	5
Less Than Every Month	2	1	4	2	2	1
Not At All	4	2	1	2	1	2
Don't Know	1	1	1	0	0	0

° We performed chi-square test comparisons to test the relationship between family change behavior and year for each audience type. Responses of "Every Day" were compared to all other response categories for 2011 and 2012. Circles indicate significant differences at the  $p < 0.05$  level. No information is provided on significance of 2010-2011 changes.

- The majority of CalFresh eligibles and recipients provide daily assistance to family members to facilitate fruit and vegetable consumption.
- Eligibles reported a significant decrease from 2011 to 2012. In contrast, recipients reported a slight increase over 2011, but this increase was not statistically significant.

**Exhibit 3.113** Family Change Behaviors Promoting Healthy Eating, “Have you set limits on the amount of unhealthy food you have in your home for your children to snack on?”

Family Change Behaviors Promoting Healthy Eating, “Have you set limits on the amount of unhealthy food you have in your home for your children to snack on?”						
	CalFresh Eligible Mothers			CalFresh Recipients		
	2010	2011	2012	2010	2011	2012
N Unweighted	961	1047	991	1002	997	1025
	%	%	%	%	%	%
<b>Yes, Set Limits</b>	<b>76</b>	<b>79</b>	<b>76</b>	<b>81</b>	<b>88</b>	<b>92</b>
No	23	20	22	18	11	7
Don't Know	1	1	2	1	1	0

° We performed chi-square test comparisons to test the relationship between family change behavior and year for each audience type. Responses of “Yes” were compared to all other response categories for 2011 and 2012. Circles indicate significant differences at the  $p < 0.05$  level. No information is provided on significance of 2010-2011 changes.

- The majority of CalFresh eligibles and recipients set limits on the consumption of unhealthy food for their families. Recipients reported a significant increase from 2011 to 2012 with 92% stating that they set limits.

**Exhibit 3.114** Family Change Behaviors Promoting Healthy Eating, “Have you set limits on the amount of sweetened beverages you have in the home for children to drink?”

Family Change Behaviors Promoting Healthy Eating, “Have you set limits on the amount of sweetened beverages you have in the home for children to drink?”						
	CalFresh Eligible Mothers			CalFresh Recipients		
	2010	2011	2012	2010	2011	2012
N Unweighted	961	1050	992	1003	995	1025
	%	%	%	%	%	%
<b>Yes, Set Limits</b>	<b>79</b>	<b>81</b>	<b>76</b>	<b>86</b>	<b>92</b>	<b>92</b>
No	20	19	22	13	7	7
Don't Know	1	0	2	1	1	0

° We performed chi-square test comparisons to test the relationship between family change behavior and year for each audience type. Responses of “Yes” were compared to all other response categories for 2011 and 2012. Circles indicate significant differences at the  $p < 0.05$  level. No information is provided on significance of 2010-2011 changes.

- The majority of CalFresh eligibles and recipients set limits on the consumption of sweetened beverages in the home.
- Eligibles reported a significant decrease from 2011 to 2012. Recipients reported no change over 2011 with 92% stating that they set limits.

**Exhibit 3.115** Family Change Behaviors Promoting Healthy Eating, "Have you replaced sugary drinks with water for your family at meals and snacks?"

Family Change Behaviors Promoting Healthy Eating, "Have you replaced sugary drinks with water for your family at meals and snacks?"*				
	CalFresh Eligible Mothers		CalFresh Recipients	
	2011	2012	2011	2012
N Unweighted	1048	990	995	1026
	%	%	%	%
<b>Yes, Replaced Sugary Drinks</b>	<b>76</b>	<b>(71)</b>	<b>88</b>	<b>89</b>
No	22	26	11	10
Don't Know	2	3	1	1

\* Question not asked in 2010

° We performed chi-square test comparisons to test the relationship between family change behavior and year for each audience type. Responses of "Yes" were compared to all other response categories for 2011 and 2012. Circles indicate significant differences at the  $p < 0.05$  level.

- The majority of CalFresh eligibles and recipients have replaced sugary drinks with water at meals and snacks.
- Eligibles reported a significant decrease from 2011 to 2012. Recipients reported a slight increase to 89%, but this increase was not statistically significant.

**Exhibit 3.116** Family Change Behaviors Promoting Healthy Eating, “How often do you make it easy to drink water?”

Family Change Behaviors Promoting Healthy Eating, “How often do you make it easy to drink water?”*				
	CalFresh Eligible Mothers		CalFresh Recipients	
	2011	2012	2011	2012
N Unweighted	1043	992	995	1025
	%	%	%	%
<b>Every Day</b>	<b>84</b>	<b>77</b>	<b>95</b>	<b>97</b>
Every Week	11	14	3	3
Every Month	2	4	1	0
Less Than Every Month	2	3	0	0
Not At All	1	1	1	0
Don't Know	1	1	0	0

\* Question not asked in 2010

° We performed chi-square test comparisons to test the relationship between family change behavior and year for each audience type. Responses of "Yes" were compared to all other response categories for 2011 and 2012. Circles indicate significant differences at the  $p < 0.05$  level.

- The majority of CalFresh eligibles and recipients reported that they make it easy each day for their families to drink water.
- Eligibles reported a significant decrease from 2011 to 2012. Recipients reported a slight increase to 97%, but this increase was not statistically significant.



**Exhibit 3.117** Family Change Behaviors Promoting Physical Activity, “How often do you make it easy for children living in your home to be physically active?”

Family Change Behaviors Promoting Physical Activity, “How often do you make it easy for children living in your home to be physically active?”						
	CalFresh Eligible Mothers			CalFresh Recipients		
	2010	2011	2012	2010	2011	2012
N Unweighted	937	1028	983	1002	993	1015
	%	%	%	%	%	%
<b>Every Day</b>	<b>68</b>	<b>74</b>	<b>63</b>	<b>63</b>	<b>70</b>	<b>69</b>
Every Week	21	19	27	28	26	25
Every Month	3	2	5	4	2	2
Less Than Every Month	3	2	3	2	2	2
Not At All	3	1	1	3	1	2
Don't Know	1	1	1	1	0	0

° We performed chi-square test comparisons to test the relationship between family change behavior and year for each audience type. Responses of "Every Day" were compared to all other response categories for 2011 and 2012. Circles indicate significant differences at the  $p < 0.05$  level. No information is provided on significance of 2010-2011 changes.

- Approximately two-thirds of CalFresh eligibles and respondents said that they make it easy for children in their home to be physically active every day.
- Eligibles reported a significant decrease in this measure from 2011 to 2012.

**Exhibit 3.118** Family Change Behaviors Promoting Physical Activity, "How often do you and your children do physical activity together?"

Family Change Behaviors Promoting Physical Activity, "How often do you and your children do physical activity together?"						
	CalFresh Eligible Mothers			CalFresh Recipients		
	2010	2011	2012	2010	2011	2012
N Unweighted	932	1033	985	1000	991	1022
	%	%	%	%	%	%
<b>Every Day</b>	<b>48</b>	<b>53</b>	<b>48</b>	<b>26</b>	<b>40</b>	<b>35</b>
Every Week	34	33	35	51	45	47
Every Month	7	6	10	9	7	8
Less Than Every Month	5	4	5	5	4	5
Not At All	5	4	2	9	3	4
Don't Know	2	1	1	1	0	0

\* We performed chi-square test comparisons to test the relationship between family change behavior and year for each audience type. Responses of "Every Day" were compared to all other response categories for 2011 and 2012. Circles indicate significant differences at the  $p < 0.05$  level. No information is provided on significance of 2010-2011 changes.

- In contrast to food behaviors where the majority reported high levels of participation, CalFresh eligible and recipient mothers reported lower rates of participation in physical activity behaviors with less than half participating in physical activity together daily.
- CalFresh eligibles and recipients reported significant decreases from 2011 to 2012 in the percentage reporting daily physical activity with their children.
- Nearly half of eligibles reported daily activity with children whereas just over one-third of recipients did so.

**Exhibit 3.119** Family Change Behaviors Promoting Physical Activity, "Have you set limits on the amount of time that your children watch TV each day?"

Family Change Behaviors Promoting Physical Activity, "Have you set limits on the amount of time that your children watch TV each day?"						
	CalFresh Eligible Mothers			CalFresh Recipients		
	2010	2011	2012	2010	2011	2012
N Unweighted	957	1046	991	997	978	1024
	%	%	%	%	%	%
<b>Yes, Set Limits</b>	<b>52</b>	<b>69</b>	<b>67</b>	<b>68</b>	<b>77</b>	<b>75</b>
No	45	30	31	31	22	25
Don't Know	3	1	2	0	1	1

° We performed chi-square test comparisons to test the relationship between family change behavior and year for each audience type. Responses of "Yes" were compared to all other response categories for 2011 and 2012. Circles indicate significant differences at the  $p < 0.05$  level. No information is provided on significance of 2010-2011 changes.

- Over two-thirds of CalFresh eligibles and recipients reported that they set limits around TV viewing in 2012.
- Eligibles and recipients reported slight decreases from 2011 to 2012, however these declines were not statistically significant.

*Family Change Behaviors: Race/Ethnic Differences*

Data on race/ethnic variations are presented in the following section.

**Exhibit 3.120** Family Change Behaviors to Support Healthy Eating By Making it Easy to eat Fruits/veggies (% Every Day), by Race/Ethnicity

Family Change Behavior to Support Healthy Eating By Making it Easy to eat Fruits/veggies (% Every Day), by Race/Ethnicity						
	CalFresh Eligibles			CalFresh Recipients		
	2010	2011	2012	2010	2011	2012
N Unweighted	945	1032	985	1005	992	1018
	%	%	%	%	%	%
<b>Total</b>	<b>64</b>	<b>72</b>	<b>65</b>	<b>67</b>	<b>73</b>	<b>75</b>
<b>Race/Ethnicity</b>						
<i>Non-Hispanic White</i>	63	75	65	71	78	83
<i>African American</i>	72	68	68	57	73	68
<i>Hispanic</i>	63	70	63	66	72	72
<i>All others</i>	65	78	70	78	72	77

° We performed t-test comparisons between 2011 and 2012 responses for each race/ethnic group. Circles indicate significant differences at the  $p < 0.05$  level.

- In terms of trend data, over two-thirds of CalFresh eligibles and recipients reported that they make it easy every day for their family to eat fruits and vegetables.
- White eligibles reported a significant decrease of 10 percentage points from 2011 to 2012.
- Family change behavior was reported significantly less frequently by African American recipients and Hispanic recipients compared to Whites in 2012.

**Exhibit 3.121** Family Change Behavior to Support Healthy Eating By Setting Limits on Unhealthy Foods (% Yes), by Race/Ethnicity

Family Change Behavior to Support Healthy Eating By Setting Limits on Unhealthy Foods (% Yes), by Race/Ethnicity						
	CalFresh Eligibles			CalFresh Recipients		
	2010	2011	2012	2010	2011	2012
N Unweighted	961	1047	991	1002	997	1025
	%	%	%	%	%	%
<b>Total</b>	<b>76</b>	<b>79</b>	<b>76</b>	<b>81</b>	<b>88</b>	<b>92</b>
<b>Race/Ethnicity</b>						
<i>Non-Hispanic White</i>	74	80	76	83	90	95
<i>African American</i>	70	78	75	83	88	91
<i>Hispanic</i>	77	79	75	79	88	91
<i>All others</i>	84	79	81	81	82	92

\* We performed t-test comparisons between 2011 and 2012 responses for each race/ethnic group. Circles indicate significant differences at the  $p < 0.05$  level.

- Overall, in 2012 CalFresh recipients reported significantly higher scores on setting limits on unhealthy food consumption than in 2011.
- Whites and all other recipients reported significantly higher scores from 2011 to 2012. Over 90% of all recipient race/ethnic groups reported setting limits in 2012.
- In comparison to Whites, Hispanic recipients scored significantly lower in 2012 on this measure.

**Exhibit 3.122** Family Change Behavior to Support Healthy Eating By Setting Limits on Sweetened Beverages (% Yes), by Race/Ethnicity

Family Change Behavior to Support Healthy Eating By Setting Limits on Sweetened Beverages (% Yes), by Race/Ethnicity						
	CalFresh Eligibles			CalFresh Recipients		
	2010	2011	2012	2010	2011	2012
N Unweighted	961	1050	992	1003	995	1025
	%	%	%	%	%	%
<b>Total</b>	<b>79</b>	<b>81</b>	<b>76</b>	<b>86</b>	<b>92</b>	<b>92</b>
<b>Race/Ethnicity</b>						
<i>Non-Hispanic White</i>	78	79	78	88	95	94
<i>African American</i>	76	76	73	83	92	90
<i>Hispanic</i>	80	79	74	86	92	92
<i>All others</i>	80	90	83	86	86	92

\* We performed t-test comparisons between 2011 and 2012 responses for each race/ethnic group. Circles indicate significant differences at the  $p < 0.05$  level.

- Overall, in 2012 CalFresh eligibles reported significantly lower scores on setting limits on sweetened beverages than in 2011.
- At least 90% of all recipient race/ethnic groups reported setting limits in 2012.
- There were no significant differences by race/ethnicity for recipients or eligibles in 2012.

**Exhibit 3.123** Family Change Behavior to Support Healthy Eating By Setting Limits on Sugary Drinks (% Yes), by Race/Ethnicity

Family Change Behavior to Support Healthy Eating By Setting Limits on Sugary Drinks (% Yes), by Race/Ethnicity <sup>*</sup>				
	CalFresh Eligibles		CalFresh Recipients	
	2011	2012	2011	2012
N Unweighted	1048	990	995	1026
	%	%	%	%
<b>Total</b>	<b>76</b>	<b>71</b>	<b>88</b>	<b>89</b>
<b>Race/Ethnicity</b>				
<i>Non-Hispanic White</i>	76	76	89	91
<i>African American</i>	72	69	91	91
<i>Hispanic</i>	73	69	87	89
<i>All others</i>	93	81	83	86

\* Question not asked in 2010

° We performed t-test comparisons between 2011 and 2012 responses for each race/ethnic group. Circles indicate significant differences at the  $p < 0.05$  level.

- Overall, in 2012 CalFresh eligibles reported significantly lower scores on setting limits on sugary drinks than in 2011.
- There were no significant differences by race/ethnicity for recipients or eligibles in 2012.

**Exhibit 3.124** Family Change Behavior to Support Healthy Eating: “How often do you make it easy to drink water?” by Race/Ethnicity

Family Change Behaviors Promoting Healthy Eating, “How often do you make it easy to drink water?”, by Race/Ethnicity *				
	CalFresh Eligibles		CalFresh Recipients	
	2011	2012	2011	2012
N Unweighted	1043	992	995	1025
	%	%	%	%
<b>Total</b>	<b>84</b>	<b>77</b>	<b>95</b>	<b>97</b>
<b>Race/Ethnicity</b>				
<i>Non-Hispanic White</i>	84	82	98	96
<i>African American</i>	87	82	92	98
<i>Hispanic</i>	82	74	94	96
<i>All others</i>	87	85	97	97

\* Question not asked in 2010

° We performed t-test comparisons between 2011 and 2012 responses for each race/ethnic group. Circles indicate significant differences at the  $p < 0.05$  level.

- Overall, in 2012 CalFresh eligibles reported significantly lower rates of family change behaviors related to drinking water.
- Hispanic eligibles reported significantly lower rates in 2012 as compared to 2011 and significantly lower rates than Whites on this measure in 2012.



**Exhibit 3.125** Family Change Behavior to Support Physical Activity By Making it Easy (% Every Day), by Race/Ethnicity

Family Change Behavior to Support Physical Activity By Making it Easy (% Every Day), by Race/Ethnicity						
	CalFresh Eligibles			CalFresh Recipients		
	2010	2011	2012	2010	2011	2012
N Unweighted	937	1028	983	1002	993	1015
	%	%	%	%	%	%
<b>Total</b>	<b>68</b>	<b>74</b>	<b>63</b>	<b>63</b>	<b>70</b>	<b>69</b>
<b>Race/Ethnicity</b>						
<i>Non-Hispanic White</i>	68	78	72	71	76	77
<i>African American</i>	79	76	70	68	62	67
<i>Hispanic</i>	66	70	60	59	68	67
<i>All others</i>	69	83	58	70	76	67

\* We performed t-test comparisons between 2011 and 2012 responses for each race/ethnic group. Circles indicate significant differences at the  $p < 0.05$  level.

- Overall, CalFresh eligibles reported significantly lower scores in regards to family change behaviors to support physical activity from 2011 to 2012.
- From 2011 to 2012, Hispanic and “other” race eligibles reported significantly lower scores.
- In 2012, African American, Hispanic and “other” race/ethnic recipients scored significantly lower than whites on this measure. Hispanic eligibles also scored significantly lower than whites in 2012.

**Exhibit 3.126** Family Change Behavior to Support Physical Activity By Doing it Together (% Every Day), by Race/Ethnicity

Family Change Behavior to Support Physical Activity By Doing it Together (% Every Day), by Race/Ethnicity						
	CalFresh Eligibles			CalFresh Recipients		
	2010	2011	2012	2010	2011	2012
N Unweighted	932	1030	985	1000	991	1022
	%	%	%	%	%	%
<b>Total</b>	<b>48</b>	<b>53</b>	<b>48</b>	<b>26</b>	<b>40</b>	<b>35</b>
<b>Race/Ethnicity</b>						
<i>Non-Hispanic White</i>	50	52	50	29	44	35
<i>African American</i>	56	53	51	23	33	33
<i>Hispanic</i>	47	50	46	26	40	38
<i>All others</i>	45	65	51	24	38	33

\* We performed t-test comparisons between 2011 and 2012 responses for each race/ethnic group. Circles indicate significant differences at the  $p < 0.05$  level.

- Overall, from 2011 to 2012, CalFresh eligibles and recipients scored significantly lower on family change behaviors related to participating in physical activity as a family.
- In 2012, White recipients scored significantly lower from 2011 to 2012.
- There were no significant race/ethnic differences in 2012 between Whites and all other race/ethnic groups.

**Exhibit 3.127** Family Change Behavior to Support Physical Activity By Setting Limits on TV (% Yes), by Race/Ethnicity

Family Change Behavior to Support Physical Activity By Setting Limits on TV (% Yes), by Race/Ethnicity						
	CalFresh Eligibles			CalFresh Recipients		
	2010	2011	2012	2010	2011	2012
N Unweighted	957	1046	991	997	978	1024
	%	%	%	%	%	%
<b>Total</b>	<b>52</b>	<b>69</b>	<b>67</b>	<b>68</b>	<b>77</b>	<b>75</b>
<b>Race/Ethnicity</b>						
<i>Non-Hispanic White</i>	49	65	62	62	74	72
<i>African American</i>	51	63	63	71	73	68
<i>Hispanic</i>	54	71	67	70	78	78
<i>All others</i>	52	72	74	64	78	77

\* We performed t-test comparisons between 2011 and 2012 responses for each race/ethnic group. Circles indicate significant differences at the  $p < 0.05$  level.

- Overall, CalFresh recipients and eligibles scored lower from 2011 to 2012 on family change behaviors related to setting limits on television watching. However, these decreases were not statistically significant.
- In 2012, there were no statistically significant differences between Whites and any other race/ethnic groups.

*Family Change Behaviors: Chronic Disease Risk and Overweight Differences*

Data on chronic disease risk and overweight status variations are presented in the following section.

**Exhibit 3.128** Family Change Behavior to Support Healthy Eating by Making it Easy (% Every Day), by Risk and Overweight

Family Change Behavior to Support Healthy Eating by Making It Easy (% Every Day), by Risk and Overweight*		
	CalFresh Eligible Mothers	CalFresh Recipients
	2012	2012
N Unweighted	985	1018
	%	%
High Risk	66	74
Low Risk	62	79
Overweight	66	75
Not Overweight	62	75

\* Risk and Overweight sub-group analyses were added in 2012. Respondents were categorized as "high risk" if they affirmed that they, or anyone in their immediate family, had ever been told they have type-2 diabetes, heart disease, or high blood pressure. Respondents were identified as overweight if their BMI met or exceeded 25.0, in accordance with CDC guidelines.

° We performed t-test comparisons between responses for high and low risk groups as well as overweight and not overweight groups within audience type. Circles indicate significant differences at the  $p < 0.05$  level.

- Approximately three-fourths CalFresh recipients and two-thirds of eligibles in both risk and weight sub-groups reported making it easy each day for their families to eat healthy. There were no significant differences between sub-groups among recipients or eligibles.

**Exhibit 3.129** Family Change Behavior to Support Healthy Eating By Setting Limits on Unhealthy Foods (% Yes), by Risk and Overweight

Family Change Behavior to Support Healthy Eating by Setting Limits on Unhealthy Foods (% Yes), by Risk and Overweight*		
	CalFresh Eligible Mothers	CalFresh Recipients
	2012	2012
N Unweighted	991	1025
	%	%
High Risk	76	92
Low Risk	75	93
Overweight	74	91
Not Overweight	78	94

\* Risk and Overweight sub-group analyses were added in 2012. Respondents were categorized as "high risk" if they affirmed that they, or anyone in their immediate family, had ever been told they have type-2 diabetes, heart disease, or high blood pressure. Respondents were identified as overweight if their BMI met or exceeded 25.0, in accordance with CDC guidelines.

° We performed t-test comparisons between responses for high and low risk groups as well as overweight and not overweight groups within audience type. Circles indicate significant differences at the  $p < 0.05$  level.

- Approximately nine in ten CalFresh recipients and seven in ten eligibles in both risk and weight sub-groups reported setting limits on unhealthy food choices. There were no significant differences between sub-groups among recipients or eligibles.

**Exhibit 3.130** Family Change Behavior to Support Healthy Eating By Setting Limits on Sweetened Beverages (% Yes), by Risk and Overweight

Family Change Behavior to Support Healthy Eating by Setting Limits on Sweetened Beverages (% Yes), by Risk and Overweight*		
	CalFresh Eligible Mothers	CalFresh Recipients
	2012	2012
N Unweighted	992	1025
	%	%
High Risk	74	93
Low Risk	78	92
Overweight	73	91
Not Overweight	79	94

\* Risk and Overweight sub-group analyses were added in 2012. Respondents were categorized as "high risk" if they affirmed that they, or anyone in their immediate family, had ever been told they have type-2 diabetes, heart disease, or high blood pressure. Respondents were identified as overweight if their BMI met or exceeded 25.0, in accordance with CDC guidelines.

° We performed t-test comparisons between responses for high and low risk groups as well as overweight and not overweight groups within audience type. Circles indicate significant differences at the  $p < 0.05$  level.

- Over 90% of CalFresh recipients in all risk and weight sub-groups reported that they set limits on sweetened beverages for their family.
- Overweight eligibles reported setting significantly lower rates of limit setting than their not overweight counterparts, however, over 70% of both weight sub-groups reported setting limits.

**Exhibit 3.131** Family Change Behavior to Support Healthy Eating By Setting Limits on Sugary Drinks (% Yes), by Risk and Overweight

Family Change Behavior to Support Healthy Eating by Setting Limits on Sugary Drinks (% Yes), by Risk and Overweight		
	CalFresh Eligible Mothers	CalFresh Recipients
	<b>2012</b>	<b>2012</b>
N Unweighted	990	1026
	%	%
High Risk	71	89
Low Risk	73	90
Overweight	69	90
Not Overweight	74	88

\* Risk and Overweight sub-group analyses were added in 2012. Respondents were categorized as "high risk" if they affirmed that they, or anyone in their immediate family, had ever been told they have type-2 diabetes, heart disease, or high blood pressure. Respondents were identified as overweight if their BMI met or exceeded 25.0, in accordance with CDC guidelines.

° We performed t-test comparisons between responses for high and low risk groups as well as overweight and not overweight groups within audience type. Circles indicate significant differences at the  $p < 0.05$  level.

- Approximately nine in ten CalFresh recipients and seven in ten eligibles in both risk and weight sub-groups reported setting limits on sugary drink consumption. There were no significant differences between sub-groups among recipients or eligibles.

**Exhibit 3.132** Family Change Behavior to Support Healthy Eating By Making it Easy to Drink Water (% Yes), by Risk and Overweight

Family Change Behavior to Support Healthy Eating by Making it Easy to Drink Water (% Yes), by Risk and Overweight*		
	CalFresh Eligible Mothers	CalFresh Recipients
	2012	2012
N Unweighted	992	1025
	%	%
High Risk	80	97
Low Risk	73	95
Overweight	77	97
Not Overweight	77	97

\* Risk and Overweight sub-group analyses were added in 2012. Respondents were categorized as "high risk" if they affirmed that they, or anyone in their immediate family, had ever been told they have type-2 diabetes, heart disease, or high blood pressure. Respondents were identified as overweight if their BMI met or exceeded 25.0, in accordance with CDC guidelines.

° We performed t-test comparisons between responses for high and low risk groups as well as overweight and not overweight groups within audience type. Circles indicate significant differences at the  $p < 0.05$  level.

- An impressive 95% or more of CalFresh recipients in both risk and weight sub-groups reported family change behaviors to facilitate water drinking.
- High risk eligibles reported significantly higher rates of family change behaviors around water drinking than their low risk counterparts.



**Exhibit 3.133** Family Change Behavior to Support Physical Activity by Making it Easy (% Every Day), by Risk and Overweight

Family Change Behavior to Support Physical Activity by Making it Easy (% Every Day), by Risk and Overweight*		
	CalFresh Eligible Mothers	CalFresh Recipients
	2012	2012
N Unweighted	983	1015
	%	%
High Risk	65	68
Low Risk	60	75
Overweight	62	69
Not Overweight	64	70

\* Risk and Overweight sub-group analyses were added in 2012. Respondents were categorized as "high risk" if they affirmed that they, or anyone in their immediate family, had ever been told they have type-2 diabetes, heart disease, or high blood pressure. Respondents were identified as overweight if their BMI met or exceeded 25.0, in accordance with CDC guidelines.

° We performed t-test comparisons between responses for high and low risk groups as well as overweight and not overweight groups within audience type. Circles indicate significant differences at the  $p < 0.05$  level.

- High risk CalFresh recipients reported significantly lower rates of family change behaviors around supporting daily physical activity for their family than their low risk counterparts.
- However, the majority of recipients and eligibles in each risk and weight sub-group reported supporting daily physical activity.

**Exhibit 3.134** Family Change Behavior to Support Physical Activity By Doing it Together (% Every Day), by Risk and Overweight

Family Change Behavior to Support Physical Activity by Doing it Together (% Every Day), by Risk and Overweight*		
	CalFresh Eligible Mothers	CalFresh Recipients
	2012	2012
N Unweighted	985	1022
	%	%
High Risk	44	34
Low Risk	53	42
Overweight	47	33
Not Overweight	49	39

\* Risk and Overweight sub-group analyses were added in 2012. Respondents were categorized as "high risk" if they affirmed that they, or anyone in their immediate family, had ever been told they have type-2 diabetes, heart disease, or high blood pressure. Respondents were identified as overweight if their BMI met or exceeded 25.0, in accordance with CDC guidelines.

° We performed t-test comparisons between responses for high and low risk groups as well as overweight and not overweight groups within audience type. Circles indicate significant differences at the  $p < 0.05$  level.

- High risk CalFresh recipients and eligibles reported significantly lower rates of family change behaviors around daily physical activity than their low risk counterparts.
- There were no significant differences in the weight sub-group among either eligibles or recipients.

**Exhibit 3.135** Family Change Behavior to Support Physical Activity By Setting Limits (% Yes), by Risk and Overweight

<b>Family Change Behavior to Support Physical Activity By Setting Limits (% Yes), by Risk and Overweight*</b>		
	<b>CalFresh Eligible Mothers</b>	<b>CalFresh Recipients</b>
	<b>2012</b>	<b>2012</b>
N Unweighted	991	1024
	%	%
High Risk	65	74
Low Risk	69	76
Overweight	65	76
Not Overweight	69	71

\* Risk and Overweight sub-group analyses were added in 2012. Respondents were categorized as "high risk" if they affirmed that they, or anyone in their immediate family, had ever been told they have type-2 diabetes, heart disease, or high blood pressure. Respondents were identified as overweight if their BMI met or exceeded 25.0, in accordance with CDC guidelines.

° We performed t-test comparisons between responses for high and low risk groups as well as overweight and not overweight groups within audience type. Circles indicate significant differences at the  $p < 0.05$  level.

- Approximately seven in ten CalFresh recipients and six in ten eligibles in both risk and weight sub-groups set limits on family physical activity. There were no significant differences between sub-groups among recipients or eligibles.

### 3.3.4 Use of Internet and Social Networking Media

This section presents the data on Internet and social network media use.

#### *Internet and Social Networking Media: Trends*

In 2008, the survey added a measure of Internet access on the tracking survey for the first time. The table below shows the data on Internet access for 2010-2012. The subsequent tables display data on social media use, which were added in 2009.

**Exhibit 3.136** Access to the Internet-Either at Home or Any Other Location at Least Once a Week

Access to the Internet -- Either at Home or Any Other Location at Least Once a Week						
	CalFresh Eligible Mothers			CalFresh Recipients		
	2010	2011	2012	2010	2011	2012
N Unweighted	962	1048	993	1009	999	1026
	%	%	%	%	%	%
<b>Yes, Have Weekly Access</b>	<b>73</b>	<b>76</b>	<b>(81)</b>	<b>78</b>	<b>83</b>	<b>(88)</b>
No	27	24	19	22	17	11
Don't Know	0	0	0	0	0	0

° We performed chi-square test comparisons to test the relationship between internet access and year for each audience type. Responses of "Yes" were compared to all other response categories for 2011 and 2012. Circles indicate significant differences at the p<0.05 level. No information is provided on significance of 2010-2011 changes.

Both CalFresh recipients and eligibles reported a significant increase in internet access from 2011 to 2012.

- The vast majority of audience members now have access to the Internet on an at least weekly basis.

**Exhibit 3.137** Mobile Access Currently Use Phone for Email and the Web

Mobile Access: Currently Use Phone for Email and the Web						
	CalFresh Eligible Mothers			CalFresh Recipients		
	2010	2011	2012*	2010	2011	2012*
N Unweighted	941	1041	992	1008	998	1026
	%	%	%	%	%	%
<b>Yes, Use Phone for Email and the Web</b>	<b>39</b>	<b>53</b>	<b>(60)</b>	<b>25</b>	<b>41</b>	<b>(56)</b>
No	61	47	40	74	58	44
Don't Know	0	0	0	<1	1	0

\* Respondents in 2010 and 2011 were first asked if they "have a cell phone with internet access for email and the web." If they responded affirmatively, they were asked if they "currently use the phone for email and web." Respondents in 2012 were asked only if they "currently use a smart phone for email and the web." Responses from 2010 and 2011 were adjusted to be comparable to 2012 responses

° We performed chi-square test comparisons to test the relationship between use of social networking sites and year for each audience type. Responses of "Yes" were compared to all other response categories for 2011 and 2012. Circles indicate significant differences at the p<0.05 level. No information is provided on significance of 2010-2011 changes.

- CalFresh recipients and eligibles reported significant increases in using phones for email and web access from 2011 to 2012. Over half of both groups reported using phones for email and the web in 2012.

**Exhibit 3.138** Use of Social Networking Sites: Have Created a Profile Online that Others Can See

Use of Social Networking Sites: Have Created a Profile Online that Others Can See						
	CalFresh Eligible Mothers			CalFresh Recipients		
	2010	2011	2012	2010	2011	2012
N Unweighted	937	1032	978	1007	999	1022
	%	%	%	%	%	%
<b>Yes, Have Profile</b>	<b>52</b>	<b>60</b>	<b>69</b>	<b>42</b>	<b>61</b>	<b>72</b>
No	48	40	31	58	39	28
Don't Know	0	0	0	0	0	0

° We performed chi-square test comparisons to test the relationship between use of social networking sites and year for each audience type. Responses of "Yes" were compared to all other response categories for 2011 and 2012. Circles indicate significant differences at the  $p < 0.05$  level. No information is provided on significance of 2010-2011 changes.

- Nearly three-quarters of CalFresh recipients and eligibles have created a social networking profile.
- Both recipients and eligibles reported a significant increase in social networking activity from 2011 to 2012.

**Exhibit 3.139** Use of Social Networking Sites: Most Common Mode of Accessing Social Networking Profile

Use of Social Networking Sites: Most Common Mode of Accessing Social Networking Profile						
	CalFresh Eligible Mothers			CalFresh Recipients		
	2010	2011	2012	2010	2011	2012
N Unweighted	503	652	708	418	610	735
	%	%	%	%	%	%
Home Computer	55	44	39	65	52	37
School Computer	3	1	1	2	2	2
Work Computer	1	2	3	2	1	2
Library Computer	3	5	2	3	3	2
Mobile Device	35	42	46	26	38	54
Don't Know/Not Sure	0	3	0	0	0	0

\* We performed t-test comparisons between 2011 and 2012 responses for each audience type. Circles indicate significant differences at the  $p < 0.05$  level.

- The most common mode of accessing a social networking profile was via a mobile device or home computer.
- CalFresh recipients and eligibles are increasingly turning to mobile devices to access social networking sites. Recipients reported a significant increase of 16 percentage points in accessing profiles on a mobile device as compared to a significant decrease of 15 percentage points in accessing profiles via home computers.
- A very minor portion of recipients and eligibles use a library computer use with eligibles reporting a significant decrease from 2011 to 2012.

**Exhibit 3.140** Use of Social Networking Sites: Frequency of Use of Social Networking Sites

Use of Social Networking Sites: Frequency of Use of Social Networking Sites						
	CalFresh Eligible Mothers			CalFresh Recipients		
	2010	2011	2012	2010	2011	2012
N Unweighted	505	651	709	417	608	737
	%	%	%	%	%	%
Several Times a Day	37	38	42	22	23	25
Once a Day	22	22	27	24	26	24
Every Few Days	15	14	13	17	18	18
Once a Week	14	12	8	13	12	14
Less Often	12	14	9	24	20	19
Don't Know/Not Sure	0	1	0	0	0	1

° We performed chi-square test comparisons to test the relationship between use of social networking sites and year for each audience type. Responses of "Yes" were compared to all other response categories for 2011 and 2012. Circles indicate significant differences at the  $p < 0.05$  level. No information is provided on significance of 2010-2011 changes.

- In terms of frequency of use, nearly half of CalFresh recipients and 69% of eligibles used social networking sites at least once per day from in 2012.
- There was an increase in the percent of the most frequent users among the recipients and eligibles from 2011 to 2012, but these increases were not statistically significant.

*Internet and Social Networking Media: Race/Ethnic Differences*

In the 2012 study we looked at race/ethnic differences in Internet and social networking media usage. These data are not presented in tabular form but the findings are summarized below.

*Access to Internet*

- Hispanic eligible and recipient audiences reported significantly lower rates of internet access (76% of eligibles and 81% of recipients) than their White counterparts (91% of eligibles and 94% of recipients). All other race/ethnic groups reported rates of internet access near 90%, regardless of audience type.

### *Social Media Profile Creation*

- Hispanic CalFresh eligibles and recipients reported lower rates of online profile development (63% of eligibles and 59% of recipients) compared to their White counterparts (81% of eligibles and 85% of recipients). Recipients self-selecting as other races (75%) also reported lower rates of online profile development compared to White recipients. Approximately 80% of African American eligible and recipient respondents reported online profile development.

### *Frequency of Use*

- Approximately 45% of eligibles and 25% of recipients reported visiting social networking sites most frequently (i.e., several times per day) regardless of race/ethnicity. The only exception was for other race-identified eligibles, who reported significantly less frequent visits to social networking sites (29% vs. 45% for White eligibles).

### *Method of Access*

- African American respondents were significantly less likely to use home computers to access social networking profiles (31% of eligibles and 26% of recipients) compared to their White counterparts (45% of eligibles and 43% of recipients).
- African American respondents (53% of eligibles and 67% of recipients) were significantly more likely to use mobile devices to access social networking profiles compared to Non-Hispanic White eligibles and recipients (44% and 47%, respectively).



### 3.4 Comparison of Key Findings between CalFresh Eligible and Recipient Mothers

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As in 2011, we noted that CalFresh recipient mothers tended to outperform CalFresh eligible mothers on key knowledge, attitudinal, belief, and behavior measures in the 2012 Tracking Survey. In 2011, we hypothesized that mothers who seek assistance from the CalFresh program are more likely to be committed to help-seeking in general compared to mothers who do not enroll in the Food Stamp program. We conducted additional analyses in 2011 to test the relationship between social service program participation (e.g., CalFresh, WIC) and key outcome measures. We found that respondents who seek additional assistance (i.e., from CalFresh and WIC) performed better on outcome measures than those who do not seek assistance. We repeated this analysis in 2012 to determine if the relationship between program participation and outcomes we observed in 2011 persisted.

We categorized participants as dual program participants (WIC and CalFresh), single program participants (WIC or CalFresh), and non-participants (neither WIC nor CalFresh). We then conducted chi-square test comparisons to test the relationship between key belief and behavioral outcomes and level of program participation.

While the results of this additional analysis are not tabled, we describe them below. As in 2011, CalFresh recipient mothers were significantly more likely to be WIC participants than CalFresh eligible mothers (64% vs. 36%, respectively). Dual program participants (i.e., WIC and CalFresh) also reported significantly higher scores than program non-participants (i.e., neither WIC nor CalFresh) on four out of five self-efficacy measures, six out of eight family change behaviors, and all eating and physical activity behaviors. No differences were observed in social normative beliefs.

## Chapter 4: Calorie Labeling and Restaurant Ordering

This chapter presents data on attitudes toward calorie labeling and restaurant ordering. These measures were added in 2011.

**Exhibit 4.1** Menu Labeling: “Do you typically read calorie information for menu items when it is available at fast food or chain restaurants?”

Menu Labeling: "Do you typically read calorie information for menu items when it is available at fast food or chain restaurants?" *				
	CalFresh Eligible Mothers		CalFresh Recipients	
	2011	2012	2011	2012
N Unweighted	1048	992	996	1026
	%	%	%	%
<b>Yes</b>	<b>39</b>	<b>38</b>	<b>53</b>	<b>51</b>
<b>No</b>	<b>57</b>	<b>59</b>	<b>38</b>	<b>40</b>
<i>Not Applicable</i>	4	3	9	8
<i>Don't Know</i>	0	1	0	0

\* Question not asked in 2010

° We performed chi-square test comparisons to test the relationship between menu labeling and year for each audience type. Responses of "Yes" were compared to all other response categories for 2011 and 2012. Circles indicate significant differences at the  $p < 0.05$  level. No information is provided on significance of 2010-2011 changes.

- The majority of CalFresh recipients reported reading calorie information for menu items when available. In contrast, the majority of eligibles do not read the calorie information.
- There were no significant differences among eligibles or recipients from 2011 to 2012.

**Exhibit 4.2** Menu Labeling: “How often does the amount of calories on the menu help you decide what to order at fast food or chain restaurants?”

Menu Labeling: “How often does the amount of calories on the menu help you decide what to order at fast food or chain restaurants?”*				
	CalFresh Eligible Mothers		CalFresh Recipients	
	2011	2012	2011	2012
N Unweighted	401	339	529	526
	%	%	%	%
Always	36	32	26	35
Most of the Time	31	26	27	25
About Half of the Time	12	12	14	12
Sometimes	20	27	26	19
Never	1	4	7	9
Don't Know	0	1	0	0

\* Question not asked in 2010

° We performed chi-square test comparisons to test the relationship between menu labeling and year for each audience type. Responses of “Always” were compared to all other response categories for 2011 and 2012. Circles indicate significant differences at the  $p < 0.05$  level. No information is provided on significance of 2010-2011 changes.

- Over half of CalFresh eligibles and recipients reported that calorie information informs their ordering decisions at least “*most of the time*”. Recipients reported a significant increase in the “*always*” category from 2011 to 2012.

## Chapter 5: Outcomes Analysis

In 2012, additional more in-depth analysis was conducted to examine any relationships between advertising exposure, healthy behaviors and attitudes and beliefs that influence those behaviors. The methods were established and have been integrated into annual analysis plans. To assess the impact of the campaign advertising and other non-ad community level exposures on healthy attitudes, beliefs, and behaviors, a series of multivariate models were constructed. Each model uses Ordinary Least Squares regression in order to measure the impact, after controlling for various factors, of advertising and non-ad community exposures on nine constructed outcome measures. These outcome measures were constructed by creating scales to capture measurement from survey items along three dimensions of behaviors, normative beliefs, and self-efficacy for both fruit and vegetable eating and physical activity. Many items were constructed separately for family change behaviors that support healthy environments and lifestyles as well as for personal or individual choices.

### Results

The results are presented in two ways. In Exhibit 5.1 we present the traditional output from a multiple regression analysis with findings in a numeric format. In Exhibit 5.2 we summarize the models and the impact of each variable graphically to show positive influence and the strength of that influence on the outcomes of interest.

In Exhibit 5.1 we present final models for each of the nine dependent or outcome variables. We divide the table into two sections. First, we present Model Statistics or summary details including the number of cases, the F-score probability and the R-square. The F-score probability gives the global test of the null hypothesis that none of the model independent variables are associated with the dependent variable. With two exceptions, the F-score probability is less than .05 and thus we can conclude that the models are significantly associated with each dependent variable, that we are confident that the relationships are not just from chance. For the two exceptions (personal physical activity behavior and personal physical activity normative beliefs)  $F > .05$  and therefore we cannot conclude that the model explains significant variation. We will exclude those two models from the remainder of our discussion.

The R-Square score gives a measure of the amount of variation or fluctuation in the scores for the dependent or outcome variable that is explained by the model including possible factors that contribute additional influence to the outcome measures. Our scores range from around 2% to around 7% of variation explained by each model. It is critical to note that, though this metric is central to most

descriptions of linear regression, it is only tangentially of interest for our purposes. We are not attempting to create models that explain significant amounts of the variation in the dependent variables. Instead, we are primarily interested in the relative impact of key metrics on the dependent variable.

The second section of Exhibit 5.1 describes the standardized model estimates that are adjusted to make easier comparisons. These numbers indicate the change in the dependent variable that would occur for a one point change in an independent variable or a factor that might change an outcome, such as exposure to an intervention. Thus, a positive score indicates that an increase in the value of that particular independent variable would result in an increase in the expected value of the dependent variable. These estimates represent the impact on the dependent variable from a one standard deviation change in independent variable. This simplifies the process of comparing the impact among independent variables.

This data is also displayed graphically in Exhibit 5.2. Exhibit 5.2 translates the standardized coefficients into graphical form with the arrow direction indication the direction of the effect (up for a positive coefficient, down for a negative coefficient), significance shown by color (gray for insignificant impact and colored for significant impact), and size of impact (with blue showing a small impact, green showing a moderate impact, and orange showing a large impact).

The impact of advertising recall on the twelve dependent or outcome variables has been considered a central question of this study. As can be seen in Exhibit 5.2, the impact of high advertising recall on the dependent variables was frequently significant (on seven of the ten significant models) and (with the exception of personal self-efficacy for physical activity) positive. This suggests that respondents who had high ad recall also had high scores on the dependent variables.

We were also concerned with the impact of exposure to non-advertising intervention. This also was frequently significant (seven of ten significant models) and positively associated with the dependent variables (again, with the exception of personal physical activity self-efficacy).

**Exhibit 5.1** Standardized Final Model Results

	Behavior: Personal Fruit/ Vegetable	Behavior: Personal Physical Activity	Behavior: Family Change Fruit/ Vegetable	Behavior: Family Change Physical Activity	Self- Efficacy: Personal Fruit/ Vegetable	Self- Efficacy: Personal Physical Activity	Self- Efficacy: Family Change Fruit/ Vegetable	Self- Efficacy: Family Change Physical Activity	Norms: Personal Fruit/ Vegetable	Norms: Personal Physical Activity	Norms: Family Change Fruit/ Vegetable	Norms: Family Change Physical Activity
<b>Model Statistics</b>												
<b>n</b>	1,071	1,071	1,071	1,071	1,071	1,071	1,071	1,071	1,042	1,048	1,047	1,051
<b>F-Score</b>	3.176	0.433	7.76	3.177	7.987	3.142	5.853	5.656	1.905	1.554	2.464	2.647
<b>F-Score probability</b>	0.001	0.918	3.73E-11	0.001	1.67E-11	0.001	5.40E-8	1.13E-7	0.048	0.125	0.009	0.005
<b>R-Square</b>	0.026	0.004	0.061	0.026	0.063	0.026	0.047	0.045	0.016	0.013	0.021	0.022
<b>Model Estimates</b>												
<b>Ad Recall</b>	0.06	0.01	0.05	-0.02	0.06	-0.07	0.07	0.05	-0.01	0.02	0.05	0.06
<b>Non-Ad Intervention</b>	0.05	0.01	0.06	0.13	0.10	-0.06	0.05	0.14	0.04	0.04	0.09	0.06
<b>CalFresh User</b>	-0.13	-0.02	-0.27	0.03	-0.02	0.04	-0.03	0.14	0.14	0.11	-0.04	0.07
<b>WIC Mother</b>	0.05	0.00	0.00	0.03	0.03	-0.07	0.05	-0.02	0.06	-0.02	-0.03	-0.01
<b>(CalFresh)* (WIC)</b>	0.04	0.01	0.11	-0.06	0.11	0.05	-0.05	-0.04	-0.11	-0.07	0.08	0.02
<b>Education</b>	0.05	-0.03	0.06	0.01	0.14	-0.03	0.12	0.06	0.04	0.04	0.06	0.06
<b>Age</b>	0.00	0.02	0.05	-0.01	0.10	0.03	0.07	-0.03	0.00	-0.02	-0.01	0.03
<b>Spanish Home Speaker</b>	0.02	-0.02	0.00	-0.03	-0.05	-0.05	-0.05	-0.08	-0.07	-0.04	-0.02	-0.05
<b>African American</b>	-0.01	-0.04	-0.06	-0.07	0.00	0.01	-0.06	-0.05	0.01	-0.01	-0.07	-0.06

**Exhibit 5.2** Summary of Model Estimates Impact and Significance

	Behavior: Personal Fruit/ Vegetable	Behavior: Personal Physical Activity	Behavior: Family Change Fruit/ Vegetable	Behavior: Family Change Physical Activity	Self- Efficacy: Personal Fruit/ Vegetable	Self- Efficacy: Personal Physical Activity	Self- Efficacy: Family Change Fruit/ Vegetable	Self- Efficacy: Family Change Physical Activity	Norms: Personal Fruit/ Vegetable	Norms: Personal Physical Activity	Norms: Family Change Fruit/ Vegetable	Norms: Family Change Physical Activity
High Recall	↑	↑	↑	↓	↑	↓	↑	↑	↓	↑	↑	↑
Non-Ad Exposure	↑	↑	↑	↑	↑	↓	↑	↑	↑	↑	↑	↑
Foodstamps	↓	↓	↓	↑	↓	↑	↓	↑	↑	↑	↓	↑
WIC	↑	↑	↑	↑	↑	↓	↑	↓	↑	↓	↓	↓
WIC*Foodstamp	↑	↑	↑	↓	↑	↑	↓	↓	↓	↓	↑	↑
Education	↑	↓	↑	↑	↑	↓	↑	↑	↑	↑	↑	↑
Age	↑	↑	↑	↓	↑	↑	↑	↓	↑	↓	↓	↑
Spanish speaker	↑	↓	↑	↓	↓	↓	↓	↓	↓	↓	↓	↓
African American	↓	↓	↓	↓	↑	↑	↓	↓	↑	↓	↓	↓

□	Not Significant
□	Low impact
□	Moderate impact
□	High impact

## Chapter 6: Conclusions and Recommendations

The 2012 Tracking Survey provides continued evidence of campaign effectiveness. Findings from the outcomes analysis suggest that exposure to ads and community interventions are both positively associated with normative and self-efficacy beliefs as well as behavior change. Unprecedented levels of campaign spending translated to the highest ad recall reported since the study's inception in 2004. Brand recognition of Champions for Change has increased among the CalFresh recipient population. Penetration of community interventions reached nearly 90%. In addition, the study showed significant movement on several measures of self-efficacy, an important factor influencing behavior and a major focus of *Network* advertising.

However, even with the high level of advertising spending in 2012, there was almost no positive movement on normative beliefs or healthy eating and physical activity behaviors. These findings suggest that the progress we are making is more incremental in nature and that a strong strategic focus will be necessary moving forward in order to keep moving the needle on obesity prevention behaviors. Moreover, funds are expected to decline in the near future further supporting the need for careful focus in the development of the next phase of campaign objectives.

Instead of offering formal recommendations this year, we provide a list of questions to stimulate strategic planning discussions going forward:

- What **behavioral outcomes** should the *Network* focus on moving forward?
- Who is the **target audience** for future campaigns and tracking surveys?
- What **messages** should the *Network* convey to the target audience?
- What **media mix** should be used to convey messages?

### Behavioral Outcomes

There has been an expanding interest in a broader array of behaviors in the Nutrition Education and Obesity Prevention (NEOP) era—not just fruit/vegetable consumption and physical activity. For example, there is interest in addressing aspects of healthy eating other than fruit and vegetable consumption and in reducing sugary beverage consumption. These additional behaviors have potentially different determinants that will need to be addressed through campaign messaging and strategy. In an era



of declining resources, the *Network* should consider whether the tackling of all of these behavior change objectives is realistic.

### Target Audience

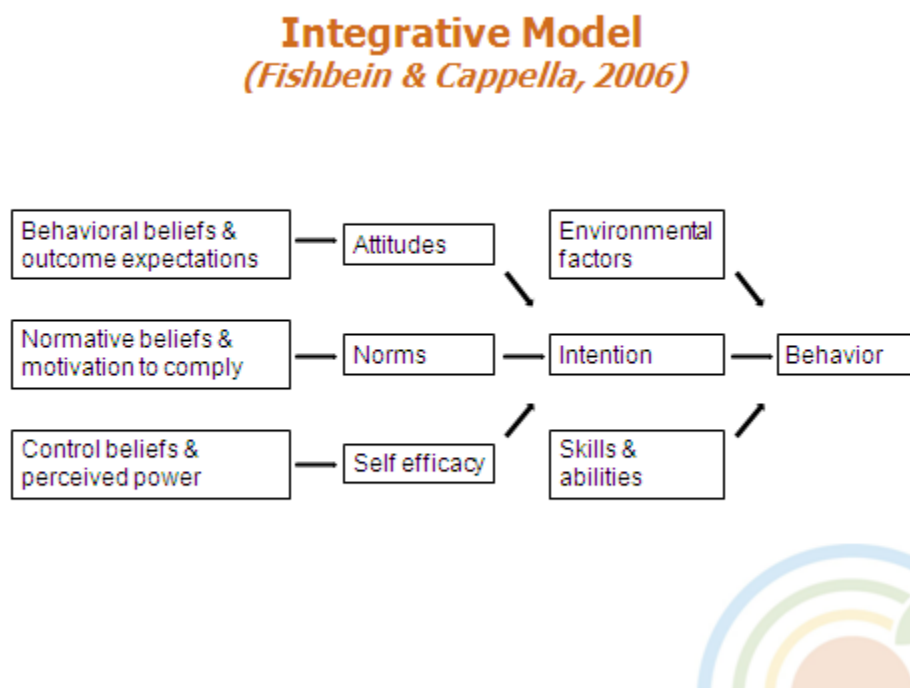
To date, the campaigns have had a broad focus on all low-income mothers of school-aged children at or below 185% of the poverty level. Would a narrowing of the focus make sense going forward? One possibility would be to focus on the overweight and families with chronic disease, since they might be particularly receptive to change. A focus here, however, may be seen to conflict with the *Network's* desire to stay focused on prevention. If so, perhaps it makes sense to focus on low-income families that do not share these health characteristics, a much smaller and perhaps more manageable group. Another possibility would be to focus on CalFresh recipients who the data suggest are motivated help-seekers benefiting from multiple interventions.

It may also be valuable to rethink our approach to audience segmentation. Currently, the primary basis for audience segmentation is race/ethnicity. Does this make sense going forward or are there other important psychographic, lifestyle and other differences that should also be taken into account in defining segments? Market segmentation research typically takes into account a broader array of factors than race/ethnicity and other demographic characteristics. As a result, it yields a more rigorous and robust understanding of segments and what it will take to reach them. This type of segmentation research takes us beyond pre-conceived views about how to think about segments and allows for them to emerge empirically from the research.

### Messages

Health behavior change is, of course, the *Network's* ultimate goal. There is evidence in the scientific literature that behavior change is a function of intentions, skills/abilities, and environmental supports, all of which are addressed in the *Network's* current campaign. The relationship between these factors is depicted in the Integrative Model in Exhibit 6.1.

## Exhibit 6.1: Fishbein and Cappella's Integrative Model



Media is best suited to drive behavior change by changing the intentions of its audience. Intentions are driven by some combination of norms, self-efficacy beliefs, behavioral beliefs, and outcome expectations, as shown in Exhibit 6.1. The actual drivers are likely different for each behavior in question. Research can tell us which are most important for any specific behavior. Efforts to this end are currently underway with other *Network*-related research projects. Understanding the drivers of the *Network*'s specifically targeted behaviors will provide the best guidance for message and strategy selection.

### Media Mix

The performance of CalFresh recipient mothers in the 2012 Tracking Survey suggests that more than traditional forms of media are needed moving forward. We need to find a way to reach many more people through on-the-ground interventions, especially those than can build skills and abilities. One possibility is to search for openings on the social media front, an approach that stands out as a possible cost-effective alternative. Our recent studies show a significant shift in the use of media from home computers to mobile devices with CalFresh recipients increasing usage from a quarter to over half in just two years. Nearly half of CalFresh recipients access social media at least once a day. This explosion in the use of social

media means we are missing a tremendous opportunity to provide tailoring, interaction, engagement, and support. If we do not pursue this option, we may run the risk of becoming irrelevant.

In reexamining the media mix, it is important to consider what is required to build skills and abilities: an intention to try something new, practice, feedback as well as some experience of success. Advertising and Multi Media Self-Efficacy Materials (MSEM) offer ways to influence self-efficacy beliefs and intention, and provide how-to-do-it tips. Social media platforms might be able to provide the practice and feedback opportunities.

## Chapter 7: Demographic Characteristics of 2012 Tracking Survey Sample

This section presents data on the socio-demographic characteristics of the 2012 Network Benchmark Survey sample by audience type. Measures include age, education, income (for eligible respondents only), race/ethnicity, WIC participation, free/reduced-lunch participation, and language spoken. For demographic characteristics of the full sample, please refer to Chapter 2.

**Exhibit 7.1** Demographic Characteristics of 2012 Network Benchmark Survey Sample, by Audience type: Age

Demographic Characteristics of 2012 Network Benchmark Survey Sample, by Audience type: Age		
	CalFresh Eligible Mothers	CalFresh Recipients
	2012	2012
N Unweighted	959	1021
	%	%
18-24 Years	25	10
25-34 Years	34	44
35-50 Years	34	41
51-64 Years	7	5
65+ Years	0	0

- Among both audiences, the 25-34 age range and the 35-50 age range were most commonly represented. There was greater representation of the 18-24 age range among CalFresh eligible mothers than among CalFresh recipient mothers (25% vs. 10%).

**Exhibit 7.2** Demographic Characteristics of 2012 Network Benchmark Survey Sample, by Audience type: Education

Demographic Characteristics of 2012 Network Benchmark Survey Sample, by Audience type: Education		
	CalFresh Eligible Mothers	CalFresh Recipients
	2012	2012
N Unweighted	987	1024
	%	%
Less Than High School	16	16
High School Graduate/GED	42	28
Some College	35	40
College Graduate (BA/BS/Master's/PH.D.)	7	15

- The majority of CalFresh eligible mothers were high school graduates (42%) or had some college experience (35%). The majority of CalFresh recipient mothers had some college experience (40%).
- CalFresh recipients were more likely to be college graduates compared to CalFresh eligible mothers (15% vs. 7%, respectively).

**Exhibit 7.3** Demographic Characteristics of 2012 Network Benchmark Survey Sample, by Audience type: Income.

Demographic Characteristics of 2012 Network Benchmark Survey Sample, by Audience type: Income*	
	CalFresh Eligible Mothers
	2012
N Unweighted	834
	%
Less Than \$15,000	25
\$15,001 - \$25,000	46
\$25,000 - \$35,000	21
\$35,001 - \$50,000	6
Greater than \$50,000	1

\*Income information is not available for CalFresh Recipients. While CalFresh Eligible Mothers are screened for income to determine eligibility, CalFresh Recipients are screened for receipt of CalFresh benefits in the past 6 months

- All mall intercept respondents were screened for income information and household size to determine CalFresh eligibility (i.e., income < 130% Federal Poverty Level). As screening criteria for CalFresh recipients were based on receipt of CalFresh benefits in the past six months, income questions were not asked for this audience.
- Almost half of eligibles had incomes ranging between \$15,001 and \$25,000. The vast majority of eligibles had incomes less than or equal to \$35,000.

**Exhibit 7.4** Demographic Characteristics of 2012 Network Benchmark Survey Sample, by Audience type: Race/Ethnicity

Demographic Characteristics of 2012 Network Benchmark Survey Sample, by Audience type: Race/Ethnicity		
	CalFresh Eligible Mothers	CalFresh Recipients
	2012	2012
N Unweighted	993	1023
	%	%
Non-Hispanic White	16	24
African American	9	18
Hispanic	65	36
All others	11	22

- The majority of respondents identified as Hispanic (65% among eligibles and 36% among recipients).

**Exhibit 7.5** Demographic Characteristics of 2012 Network Benchmark Survey Sample, by Audience type: WIC Participation Among Respondents with Children Aged 5 or Younger

Demographic Characteristics of 2012 Network Benchmark Survey Sample, by Audience type: WIC Participation Among Respondents with Children Aged 5 or Younger*		
	CalFresh Eligible Mothers	CalFresh Recipients
	2012	2012
N Unweighted	491	611
	%	%
<b>Yes</b>	<b>57</b>	<b>81</b>
<b>No/Don't Know (net)</b>	<b>43</b>	<b>19</b>
<i>No</i>	43	19
<i>Don't Know</i>	0	0

\* Question asked only of respondents with children aged 5 or under

- WIC participation was asked only of respondents with children aged 5 and younger.
- WIC participation was higher among CalFresh recipients (81%) compared to CalFresh eligible mothers (57%).

**Exhibit 7.6** Demographic Characteristics of 2012 Network Benchmark Survey Sample, by Audience type: Free-reduced lunch participation

Demographic Characteristics of 2012 Network Benchmark Survey Sample, by Audience type: Free-reduced lunch participation		
	CalFresh Eligible Mothers	CalFresh Recipients
	2012	2012
N Unweighted	993	1026
	%	%
Yes	50	77
No	37	15
No, Children Are Not in School/Don't Know	13	8

- All respondents were asked if any of their school-aged children receive free or reduced price school meals.
- Receipt of free/reduced-price lunch was higher among CalFresh recipients (77%) compared to CalFresh eligible mothers (50%).

**Exhibit 7.7** Demographic Characteristics of 2012 Network Benchmark Survey Sample, by Audience type: Languages Spoken Fluently by Respondents

Demographic Characteristics of 2012 Network Benchmark Survey Sample, by Audience type: Languages Spoken Fluently By Respondents*		
	CalFresh Eligible Mothers	CalFresh Recipients
	2012	2012
N Unweighted	809	1026
	%	%
English Only	59	61
English and Spanish	35	28
English and Other Language	7	11

\* Question asked only of respondents who completed the survey in English

- Respondents who completed the survey in English were asked if they spoke any languages fluently other than English.
- Responses were evenly distributed by audience type.



**Exhibit 7.8** Demographic Characteristics of 2012 Network Benchmark Survey Sample, by Audience type: Languages Spoken at Home

Demographic Characteristics of 2012 Network Benchmark Survey Sample, by Audience type: Languages Spoken at Home*		
	CalFresh Eligible Mothers	CalFresh Recipients
	2012	2012
N Unweighted	319	288
	%	%
English Only	7	25
More English than Spanish	21	27
Both Equally	30	35
More Spanish than English	19	9
Spanish Only	24	3

\*Question asked only of respondents who completed the survey in Spanish or who indicated they speak Spanish in addition to English

- Spanish speaking respondents (e.g., those who completed the survey in Spanish or completed it in English but indicated that they also speak Spanish) were asked which language they usually speak at home. Exclusive Spanish speaking was more common among CalFresh eligible mothers while exclusive English speaking was more common among CalFresh recipients.



## Appendices

### Screeners

- Low-Income Mothers Screener –English
- Low-Income Mothers Screener –Spanish
- CalFresh Recipient Mothers Screener –English
- CalFresh Recipient Mothers Screener –Spanish

### Questionnaires

- Benchmark Questionnaire –English
- Benchmark Questionnaire –Spanish

NORC at the University of Chicago  
Chicago, IL

## 2012 Benchmark Survey

### Screener – Low-Income Mothers

#### INTRODUCTION

Hello, my name is \_\_\_\_\_. We're conducting a survey today on behalf of the California Department of Public Health and the Public Health Institute to help improve programs and services throughout the State. Will you answer a few questions to see if you qualify for the survey?

- All your responses will be kept completely confidential, and used only for statistical purposes.
- I think you will find the survey interesting.
- We will give you \$15 for completing the interview.

#### S1. RECORD GENDER OF ADULT

MALE ..... 1 (THANK AND TERMINATE)  
FEMALE ..... 2 (CONTINUE TO S2)

#### S2. We don't need to know exactly, but which of the following age categories are you in? (READ CATEGORIES)

Less than 18 ..... 1 (THANK AND TERMINATE)  
18 – 24 ..... 2 (CONTINUE TO S3)  
25 – 29 ..... 3 (CONTINUE TO S3)  
30 – 39 ..... 4 (CONTINUE TO S3)  
40 – 49 ..... 5 (CONTINUE TO S3)  
50 – 54 ..... 6 (CONTINUE TO S3)  
55 or older ..... 7 (THANK AND TERMINATE)  
REFUSED ..... 99 (THANK AND TERMINATE)

#### S3. Would you feel more comfortable doing the interview in English or Spanish?

ENGLISH ..... 1 (CONTINUE IN ENGLISH)  
SPANISH ..... 2 (SWITCH TO SPANISH INTERVIEW, IF AVAILABLE)  
OTHER ..... 3 (THANK AND TERMINATE)

***In order to determine if you are eligible to participate, I need to ask you a few questions about your family size and income.***

#### S4. Do you have any children living at home with you who are under age 18?

YES ..... 1 (CONTINUE TO S5)  
NO ..... 2 (THANK AND TERMINATE)  
REFUSED ..... 99 (THANK AND TERMINATE)

#### S5. Are you the parent or involved in raising any of the children under age 18 living in your home?

YES, PARENT ..... 1  
YES, INVOLVED IN RAISING ..... 2 } (CONTINUE TO S6)  
NO ..... 77 (THANK AND TERMINATE)  
REFUSED ..... 99 (THANK AND TERMINATE)

**S6.** To make sure we are interviewing a balanced group of Californians, I need to find out whether you are of Latino or Hispanic origin? **(IF NEEDED:)** such as Mexican- American, Latin American, South American, or Spanish-American?

YES, HISPANIC.....	1	} (CONTINUE TO S7)
NO, NON-HISPANIC.....	2	
DON'T KNOW/NOT SURE .....	8	
REFUSED .....	9	

**S7.** For classification purposes, we'd like to know what your racial background is. Are you White, Black or African American, Asian, Pacific-Islander, American Indian or an Alaskan Native, a member of another race or a combination of races? **(ALLOW MULTIPLE ANSWERS)**

WHITE.....	1	} (CHECK QUOTA)
BLACK/AFRICAN-AMERICAN.....	2	
ASIAN .....	3	
PACIFIC ISLANDER .....	4	
AMERICAN INDIAN/ALASKAN NATIVE .....	5	
HISPANIC/LATINO (VOLUNTEER ONLY) .....	6	
OTHER RACE/ETHNICITY (.....)	7	
(SPECIFY)		

DON'T KNOW.....	77	} (THANK AND TERMINATE)
REFUSED .....	99	

**INTERVIEWER: CHECK QUOTA SHEET, CONTINUE IF ETHNICITY QUOTA IS NOT FILLED**

**S8.** What is the total number of people, including yourself, living in your household?

_____ (RECORD NUMBER OF PEOPLE) (MUST BE > 1) 1	(CONTINUE TO S9)
REFUSED .....	99 (THANK AND TERMINATE)

**S9.** What is your household's total annual income before taxes are taken out? This includes income from wages, cash aid, unemployment, social security, and any other source. **(PROBE FOR ANNUAL INCOME BEFORE TAXES)**

\$ _____	} (CONTINUE TO INSTRUCTIONS)	
DON'T KNOW/NOT SURE .....		77
REFUSED .....		99

**INSTRUCTIONS:**

- 1) Find number of people in household from S8 and circle that number in column **A** for Family Size.
- 2) Is respondent's income **less than or equal to the 130%** income cutoff from column **B**?
  - IF YES, **CONTINUE INTERVIEW / QUALIFIES FOR 130% QUOTA.**
  - IF NO, **THANK AND TERMINATE**

<b>A</b>	<b>B</b>
<i>CIRCLE FAMILY SIZE</i>	<i>CIRCLE IF INCOME FROM S9 IS <math>\leq</math> 130% CUTOFF...</i>
<b>FAMILY SIZE</b>	<b>130% FPL INCOME CUTOFF</b>
2	\$19,669 YES → QUALIFIES 130% QUOTA
3	\$24,817 YES → QUALIFIES 130% QUOTA
4	\$29,965 YES → QUALIFIES 130% QUOTA
5	\$35,113 YES → QUALIFIES 130% QUOTA
6	\$40,261 YES → QUALIFIES 130% QUOTA
7	\$45,409 YES → QUALIFIES 130% QUOTA
8	\$50,557 YES → QUALIFIES 130% QUOTA
For each additional person, add	\$5,148 YES → QUALIFIES 130% QUOTA

**S10a. RESPONDENT'S HOUSEHOLD INCOME IS: (circle one)**

LESS THAN / EQUAL TO 130% INCOME CUTOFF.....	1 (130% INCOME QUOTA; GO TO S11)
MORE THAN 130% INCOME CUTOFF.....	3 (THANK AND TERMINATE)

(IF S9 = "DON'T KNOW" OR "REFUSED" ANNUAL INCOME -- USE SPARINGLY!! – ASK:)

**S10b.** Even though you don't have an exact number, can you tell me if your income is less than \$\_\_\_\_\_ (USE COLUMN B (130% INCOME CUTOFF) FOR RESPONDENT'S FAMILY SIZE)?

YES .....	1 (CONTINUE INTERVIEW)
NO .....	2 (THANK AND TERMINATE)
DON'T KNOW/NOT SURE .....	77 (THANK AND TERMINATE)
REFUSED .....	99 (THANK AND TERMINATE)

(IF 130% INCOME QUOTA, ASK:)

**S11. Have you used CalFresh benefits, Food Stamps, or EBT in the last 12 months?**

YES .....	1 (THANK AND TERMINATE)
NO .....	2 (CONTINUE TO S12)
DON'T KNOW/NOT SURE .....	77 (CONTINUE TO S12)
REFUSED .....	99 (THANK AND TERMINATE)

**S12. Are you a California resident?**

YES .....	1 (CONTINUE TO S13)
NO .....	2 (THANK AND TERMINATE)
DON'T KNOW .....	77 (THANK AND TERMINATE)
REFUSED .....	99 (THANK AND TERMINATE)

**S13.** Do you live in the area (20 to 25 miles) or are you visiting from somewhere else?

YES, I LIVE WITHIN 20 TO 25 MILES .....	1	(CONTINUE TO S14)
NO, I DON'T LIVE WITHIN 20 TO 25 MILES .....	2	(THANK AND TERMINATE)
DON'T KNOW.....	77	(THANK AND TERMINATE)
REFUSED.....	99	(THANK AND TERMINATE)

## INVITATION

We are seeking women to participate in a research study about eating and physical activity. If you choose to participate, you will be asked to complete an interview that will take about 30-35 minutes. We are interested in your thoughts and opinions. The only risk involved will be in answering questions included in the interviews. There may be a benefit to you; many people find participation in surveys interesting and educational. You will also be contributing to scientific knowledge on health issues. You can choose not to answer any question and can stop participation at any time.

### **INFORMED CONSENT SCRIPT**

**(SAY TO ALL:)**

**S14.** Before I continue, I would like to remind you that everything you say is completely confidential. Your participation is totally voluntary. There will be no harmful effect on any public benefits you may receive if you decide not to participate or answer any of the questions. This is a research study being sponsored by the California Department of Public Health and the Public Health Institute. The purpose of the study is to improve programs and services for children and adults in California. If you have any questions about the survey, you may contact our survey supervisor, Eric Lopez, for additional information on our research. **(1-877-267-7915).**

**S15.** Would you like to participate in an interview?

YES .....	1	(VERBAL CONSENT GIVEN, CONTINUE)
NO .....	2	(THANK AND TERMINATE)
DON'T KNOW.....	77	(THANK AND TERMINATE)
REFUSED.....	99	(THANK AND TERMINATE)

NORC at the University of Chicago  
Chicago, IL

## 2012 Benchmark Survey

### Screeners – Low-Income Mothers

#### INTRODUCTION

Hola, mi nombre es \_\_\_\_\_. Estamos realizando hoy una encuesta en nombre del Departamento Estatal de Salud Pública de California y el Instituto de Salud Pública para ayudar a mejorar los programas y servicios en todo el Estado. ¿Usted responderá a algunas preguntas para ver si califica para la encuesta?

- Todas sus respuestas serán completamente confidenciales y sólo se utilizarán para fines de estadística.
- Creo que usted encontrará la encuesta interesante.
- Se le dará \$ 15 por completar la entrevista.

#### S1. RECORD GENDER OF ADULT

MALE ..... 1 (THANK AND TERMINATE)  
FEMALE ..... 2 (CONTINUE TO S2)

#### S2. No necesitamos saber exactamente, pero nos gustaría saber ¿en cuál de las siguientes categorías de edad se encuentra usted? (READ CATEGORIES)

Menos de 18 años de edad ..... 1 (THANK AND TERMINATE)  
18 – 24 ..... 2 (CONTINUE TO S3)  
25 – 29 ..... 3 (CONTINUE TO S3)  
30 – 39 ..... 4 (CONTINUE TO S3)  
40 – 49 ..... 5 (CONTINUE TO S3)  
50 – 54 ..... 6 (CONTINUE TO S3)  
55 años de edad o mayor ..... 7 (THANK AND TERMINATE)  
REFUSED ..... 99 (THANK AND TERMINATE)

***Con el fin de determinar si usted califica para participar en la encuesta, tengo que hacerle un par de preguntas sobre el tamaño de su familia y de ingresos.***

#### S4. ¿Tiene usted hijos que viven en casa con ustedes que son menores de 18 años?

YES ..... 1 (CONTINUE TO S5)  
NO ..... 2 (THANK AND TERMINATE)  
REFUSED ..... 99 (THANK AND TERMINATE)

#### S5. ¿Es usted madre o está involucrada en la crianza de los hijos menores de 18 años de edad que viven en su hogar?

YES, PARENT ..... 1 } (CONTINUE TO S6)  
YES, INVOLVED IN RAISING ..... 2 }  
NO ..... 77 (THANK AND TERMINATE)  
REFUSED ..... 99 (THANK AND TERMINATE)



**S6.** Para asegurarnos de que estemos entrevistando a un grupo balanceado de californianos, necesito saber si usted es de origen latino o hispano (IF NEEDED:) tal como México-Americana, Latino Americana, Sur Americana, Hispano-Americana?

YES, HISPANIC.....	1	} (CONTINUE TO S7)
NO, NON-HISPANIC.....	2	
DON'T KNOW/NOT SURE .....	77	
REFUSED .....	99	

**S7.** Para propósitos de clasificación, nos gustaría saber cuál es su origen racial. Es usted Blanca, Negra o Afro-Americana, Asiática, Isleña del Pacífico, India Americana o Nativa de Alaska, miembro de otra raza o una combinación de razas? (ALLOW MULTIPLE ANSWERS)

WHITE.....	1	} (CHECK QUOTA)
BLACK/AFRICAN-AMERICAN.....	2	
ASIAN .....	3	
PACIFIC ISLANDER .....	4	
AMERICAN INDIAN/ALASKAN NATIVE .....	5	
HISPANIC/LATINO (VOLUNTEER ONLY) .....	6	
OTHER RACE/ETHNICITY (.....).7		} (THANK AND TERMINATE)
(SPECIFY)		
DON'T KNOW .....	77	}
REFUSED .....	99	

**INTERVIEWER: CHECK QUOTA SHEET, CONTINUE IF ETHNICITY QUOTA IS NOT FILLED**

**S8.** ¿Cuál es el número total de personas, incluyéndose usted misma, que viven en su hogar?

_____ (RECORD NUMBER OF PEOPLE) (MUST BE > 1) 1	(CONTINUE TO S9)
REFUSED .....	99 (THANK AND TERMINATE)

**S9.** ¿Cuál es el ingreso anual total de su hogar antes de deducir los impuestos? Esto incluye los ingresos por salarios, asistencia monetaria, el desempleo, la seguridad social y cualquier otra fuente. (PROBE FOR ANNUAL INCOME BEFORE TAXES)

\$ _____	} (CONTINUE TO INSTRUCTIONS)	
DON'T KNOW/NOT SURE .....		77
REFUSED .....		99

**INSTRUCTIONS:**

- 1) Find number of people in household from S8 and circle that number in column **A** for Family Size.
- 2) Is respondent's income **less than or equal to the 130%** income cutoff from column **B**?
  - IF YES, **CONTINUE INTERVIEW / QUALIFIES FOR 130% QUOTA.**
  - IF NO, **THANK AND TERMINATE**
  - IF NOT SURE/REFUSED, **ENCOURAGE THEM TO GIVE A FIGURE;**  
**IF THEY CONTINUE TO SAY NOT SURE/REFUSED, GO TO S10b.**

<b>A</b>	<b>B</b>
<i>CIRCLE FAMILY SIZE</i>	<i>CIRCLE IF INCOME FROM S9 IS <math>\leq</math> 130% CUTOFF...</i>
<b>FAMILY SIZE</b>	<b>130% FPL INCOME CUTOFF</b>
2	\$19,669 YES → QUALIFIES 130% QUOTA
3	\$24,817 YES → QUALIFIES 130% QUOTA
4	\$29,965 YES → QUALIFIES 130% QUOTA
5	\$35,113 YES → QUALIFIES 130% QUOTA
6	\$40,261 YES → QUALIFIES 130% QUOTA
7	\$45,409 YES → QUALIFIES 130% QUOTA
8	\$50,557 YES → QUALIFIES 130% QUOTA
For each additional person, add	\$5,148 YES → QUALIFIES 130% QUOTA

**S10a. RESPONDENT'S HOUSEHOLD INCOME IS: (circle one)**

LESS THAN / EQUAL TO 130% INCOME CUTOFF.....	1 (130% INCOME QUOTA; GO TO S11)
MORE THAN 130% INCOME CUTOFF.....	3 (THANK AND TERMINATE)

(IF S9 = "DON'T KNOW" OR "REFUSED" ANNUAL INCOME -- USE SPARINGLY!! – ASK:)

**S10b.** A pesar de que usted no tenga un número exacto, ¿me podría decir si su ingreso es menor de? \$\_\_\_\_\_ (USE COLUMN B (130% INCOME CUTOFF) FOR RESPONDENT'S FAMILY SIZE)?

YES .....	1 (CONTINUE INTERVIEW)
NO .....	2 (THANK AND TERMINATE)
DON'T KNOW/NOT SURE .....	77 (THANK AND TERMINATE)
REFUSED .....	99 (THANK AND TERMINATE)

(IF 130% INCOME QUOTA, ASK:)

**S11. ¿Ha utilizado los beneficios de CalFresh, Cupones de Alimentos o EBT en los últimos 12 meses?**

YES .....	1 (THANK AND TERMINATE)
NO .....	2 (CONTINUE TO S12)
DON'T KNOW/NOT SURE .....	77 (CONTINUE TO S12)
REFUSED.....	99 (THANK AND TERMINATE)

**S12. ¿Es usted residente de California?**

YES .....	1 (CONTINUE TO S13)
NO .....	2 (THANK AND TERMINATE)
DON'T KNOW.....	77 (THANK AND TERMINATE)
REFUSED.....	99 (THANK AND TERMINATE)

**S13.** ¿Vive usted en el área (de 20 a 25 millas) o está de visita de algún otro lugar?

YES, I LIVE WITHIN 20 TO 25 MILES .....	1	(CONTINUE TO S14)
NO, I DON'T LIVE WITHIN 20 TO 25 MILES .....	2	(THANK AND TERMINATE)
DON'T KNOW .....	77	(THANK AND TERMINATE)
REFUSED .....	99	(THANK AND TERMINATE)

## INVITATION

Estamos buscando mujeres para participar en un estudio de investigación acerca de la actividad física y la alimentación. Si usted decide participar, se le pedirá que complete una entrevista que tomará alrededor de 30-35 minutos. Estamos interesados en sus ideas y opiniones. El único riesgo involucrado será responder a las preguntas incluidas en las entrevistas. Puede haber un beneficio para usted, ya que muchas personas encuentran la participación en encuestas interesante y educativa. También usted contribuirá al conocimiento científico en temas de salud. Usted puede optar por no contestar cualquier pregunta y puede dejar de participar en cualquier momento.

### INFORMED CONSENT SCRIPT

(SAY TO ALL:)

**S14.** Antes de continuar, me gustaría recordarle que todo lo que usted diga es totalmente confidencial. Su participación es totalmente voluntaria. No habrá ningún efecto perjudicial sobre los beneficios públicos que usted pueda recibir si decide no participar o responder alguna de las preguntas. Se trata de un estudio de investigación patrocinado por el Departamento de Salud Pública de California y el Instituto de Salud Pública. El propósito del estudio es mejorar los programas y servicios para niños y adultos en California. Si usted tiene alguna pregunta acerca de la encuesta, puede comunicarse con nuestro supervisor de la encuesta, **Eric Lopez**, para obtener más información sobre nuestra investigación. **(1-877-267-7915)**

**S15.** ¿A usted le gustaría participar en una entrevista?

YES .....	1	(VERBAL CONSENT GIVEN, CONTINUE)
NO .....	2	(THANK AND TERMINATE)
DON'T KNOW .....	77	(THANK AND TERMINATE)
REFUSED .....	99	(THANK AND TERMINATE)

**2012 Benchmark Survey**  
**~ Screener – CalFresh/Food Stamp Moms ~**

[INSERT GEO CODE FROM SAMPLE]

**INTRODUCTION**

Hello, my name is \_\_\_\_\_ and I'm calling on behalf of the California Department of Public Health and the Public Health Institute. We are conducting an important survey among parents to help the Department of Public Health improve programs and services for families with children throughout the State.

**(PROGRAMMER: IF REPEATING INTRO, ALSO SHOW: For this survey, we are interested in speaking to mothers or female guardians ages 18 to 54 who have children under the age of 18.)**

All your responses will be kept completely confidential, and used only for statistical purposes.

CONTINUE ..... 1  
LANGUAGE BARRIER ..... 2  
RETURN TO CONTACT SCREEN ..... 3  
HANG UP DURING INTRO ..... 4

- S1. We are trying to get a balanced group of parents throughout the State. For this survey, we are interested in speaking to mothers or female guardians of children under the age of 18. Are there any children under 18 living in this household?

YES ..... 1 (CONTINUE TO S2)  
NO ..... 2 (TERMINATE)  
DON'T KNOW ..... DK (ASK TO SPEAK TO SOMEONE WHO  
MAY KNOW THE ANSWER, ARRANGE  
CALLBACK IF NECESSARY)  
REFUSED ..... REF (TERMINATE)

- S2. May I speak to (the)(another) 18 to 54-year old mother or female guardian of children under 18?  
(IF NEEDED: Would that be you or someone else?)

SPEAKING TO MOTHER/GUARDIAN AGE 18-54 ..... 1 (CONTINUE TO S3)  
MOTHER/GUARDIAN AGE 18-54 COMES TO PHONE ..... 2 (REPEAT INTRO, THEN  
CONTINUE TO S3)  
MOTHER/GUARDIAN 18-54 IS NOT AVAILABLE ..... 3 (ARRANGE CALLBACK)  
NO (OTHER) MOTHERS/GUARDIANS 18-54 IN HOUSEHOLD ..... 4 (TERMINATE)  
NO ADULTS 18 OR OLDER IN HOUSEHOLD ..... 5 (TERMINATE)  
LANGUAGE BARRIER ..... 6  
DON'T KNOW ..... DK (ASK TO SPEAK TO SOMEONE WHO  
MAY KNOW THE ANSWER, ARRANGE  
CALLBACK IF NECESSARY)  
REFUSED ..... REF (TERMINATE)

- S3. Just to verify, you are age 18 to 54?

YES ..... 1 (CONTINUE TO S4)  
NO ..... 2 (GO TO S2 IF MORE THAN ONE  
FEMALE IN HH)

- S4. Have you received CalFresh benefits, Food Stamps, or EBT at any time during the last 6 months?

YES ..... 1 (CONTINUE TO S5)  
NO ..... 2 (TERMINATE)  
DON'T KNOW ..... DK (TERMINATE)  
REFUSED ..... REF (TERMINATE)

- S5. Would you feel more comfortable doing the interview in English or Spanish?
- ENGLISH ..... 1 (CONTINUE)  
SPANISH ..... 2 (SCHEDULE SPANISH CALLBACK)  
OTHER..... 2 (CODE AS LANGUAGE BARRIER)
- S6. To make sure we are interviewing a balanced group of Californians, I need to find out whether you are of Latino or Hispanic origin? (IF NEEDED:) such as Mexican- American, Latin American, South American, or Spanish-American?
- YES, HISPANIC ..... 1  
NO, NON-HISPANIC ..... 2  
DON'T KNOW/NOT SURE ..... 8  
REFUSED ..... 9
- S7. For classification purposes, we'd like to know what your racial background is. Are you White, Black or African American, Asian, Pacific-Islander, American Indian or an Alaskan Native, a member of another race or a combination of races? (ALLOW MULTIPLE ANSWERS)
- WHITE..... 1  
BLACK/AFRICAN-AMERICAN..... 2  
ASIAN ..... 3  
PACIFIC ISLANDER..... 4  
AMERICAN INDIAN/ALASKAN NATIVE ..... 5  
HISPANIC/LATINO (VOLUNTEER ONLY)..... 6  
OTHER RACE/ETHNICITY (\_\_\_\_\_) ..... 7  
(SPECIFY)
- DON'T KNOW ..... DK  
REFUSED ..... REF

## INVITATION

We are seeking women to participate in a research study about eating and physical activity. If you choose to participate, you will be asked to complete an interview that will take about 30-35 minutes. We are interested in your thoughts and opinions. The only risk involved will be in answering questions included in the interviews. There may be a benefit to you; many people find participation in surveys interesting and educational. You will also be contributing to scientific knowledge on health issues. You can choose not to answer any question and can stop participation at any time.

## INFORMED CONSENT SCRIPT

S8. Before I continue, I would like to remind you that everything you say is completely confidential. Your participation is totally voluntary. There will be no harmful effect on any public benefits you may receive if you decide not to participate or answer any of the questions. This is a research study being sponsored by the California Department of Public Health and the Public Health Institute. The purpose of the study is to improve programs and services for children and adults in California. If you have any questions about the survey, you may contact our survey supervisor, Eric Lopez, for additional information on our research. (1-877-267-7915).

This call may be monitored by my supervisor to ensure quality and courtesy.

S9. Would you like to participate in an interview?

YES .....	1	(VERBAL CONSENT GIVEN)
NO, CALLBACK .....	2	(CALLBACK)
NO .....	3	(THANK AND TERMINATE)
DON'T KNOW .....	DK	(CALLBACK)
REFUSED .....	REF	(CODE AS SOFT OR HARD REFUSAL)

**2012 Benchmark Survey**  
**~ Screener – CalFresh/Food Stamp Moms ~**  
**2012 Estudio de Referencia**  
**~Entrevistador-Madres de Cupones para Alimentos/CalFresh~**

[INSERT GEO CODE FROM SAMPLE]

**INTRODUCTION**  
**INTRODUCCIÓN**

Hello, my name is \_\_\_\_\_ and I'm calling on behalf of the California Department of Public Health and the Public Health Institute. We are conducting an important survey among parents to help the Department of Public Health improve programs and services for families with children throughout the State.

(PROGRAMMER: IF REPEATING INTRO, ALSO SHOW: For this survey, we are interested in speaking to mothers or female guardians ages 18 to 54 who have children under the age of 18.)

Hola, mi nombre es \_\_\_\_\_ y estoy llamando de parte del Departamento Estatal de Salud Pública de California y del Instituto de Salud Pública. Estamos llevando a cabo una importante encuesta entre los padres de familia para ayudar al Departamento de Salud Pública a mejorar los programas y servicios para las familias con niños de todo el Estado. Para esta encuesta, estamos interesados en hablar con las madres o guardianas entre las edades de 18 a 54 que tienen hijos menores de 18 años.)

(PROGRAMMER: IF REPEATING INTRO, ALSO SHOW:

All your responses will be kept completely confidential, and used only for statistical purposes.

Todas sus respuestas serán completamente confidenciales y sólo se utilizarán para fines de estadísticas.

CONTINUE .....	1
LANGUAGE BARRIER .....	2
RETURN TO CONTACT SCREEN .....	3
HANG UP DURING INTRO .....	4
CONTINÚE.....	1
BARRERA DEL IDIOMA.....	2
VOLVER A LA PANTALLA DE CONTACTO.....	3
COLGAR DURANTE LA INTRODUCCIÓN.....	4

- S1. We are trying to get a balanced group of parents throughout the State. For this survey, we are interested in speaking to mothers or female guardians of children under the age of 18. Are there any children under 18 living in this household?

S1 Estamos tratando de conseguir un grupo balanceado de padres de todo el Estado. Para esta encuesta, estamos interesados en hablar con las madres o guardianas de niños menores de 18 años. ¿Hay niños menores de 18 años edad que viven en este hogar?

YES .....	1	(CONTINUE TO S2)
NO.....	2	(TERMINATE)
DON'T KNOW.....	DK	(ASK TO SPEAK TO SOMEONE WHO MAY KNOW THE ANSWER, ARRANGE CALLBACK IF NECESSARY)
REFUSED.....	REF	(TERMINATE)
SI.....	1	
NO.....	2	
NO SÉ.....	NS	
RECHAZÓ.....	RECH	

- S2. May I speak to (the)(another) 18 to 54-year old mother or female guardian of children under 18? (IF NEEDED: Would that be you or someone else?)

S2. ¿Puedo hablar con (la) (otra) madre entre 18 a 54 años de edad o guardiana de niños menores de 18 años? (IF NEEDED: Would that be you or someone else?)

SPEAKING TO MOTHER/GUARDIAN AGE 18-54 .....	1	(CONTINUE TO S3)
MOTHER/GUARDIAN AGE 18-54 COMES TO PHONE.....	2	(REPEAT INTRO, THEN CONTINUE TO S3)
MOTHER/GUARDIAN 18-54 IS NOT AVAILABLE .....	3	(ARRANGE CALLBACK)
NO (OTHER) MOTHERS/GUARDIANS 18-54 IN HOUSEHOLD .....	4	(TERMINATE)
NO ADULTS 18 OR OLDER IN HOUSEHOLD .....	5	(TERMINATE)
LANGUAGE BARRIER .....	6	
DON'T KNOW.....	DK	(ASK TO SPEAK TO SOMEONE WHO MAY KNOW THE ANSWER, ARRANGE CALLBACK IF NECESSARY)
REFUSED.....	REF	(TERMINATE)
HABLANDO CON LA MADRE/GUARDIANA ENTRE 18 A 54 AÑOS DE EDAD.....	1	
LA MADRE/GUARDIANA ENTRE 18 A 54 AÑOS DE EDAD SE PONE AL TELÉFONO.....	2	
LA MADRE/GUARDIANA ENTRE 18 A 54 AÑOS DE EDAD NO ESTÁ DISPONIBLE.....	3	
NO HAY (OTRA) MADRE/GUARDIANA ENTRE 18 A 54 AÑOS DE EDAD EN EL HOGAR ..	4	
NO HAY ADULTOS ENTRE 18 AÑOS DE EDAD O MAYORES EN EL HOGAR.....	5	
BARRERA DEL IDIOMA.....	6	
NO SÉ.....	NS	
RECHAZÓ.....	RECH	



- S3. Just to verify, you are age 18 to 54?  
 S3. Sólo para comprobar, ¿usted tiene entre 18 y 54 años de edad?
- YES ..... 1 (CONTINUE TO S4)  
 NO ..... 2 (GO TO S2 IF MORE THAN ONE FEMALE IN HH)
- Sí.....1  
 NO.....2
- S4. Have you received CalFresh benefits, Food Stamps, or EBT at any time during the last 6 months?  
 S4. ¿Usted ha recibido beneficios CalFresh, Cupones de Alimentos o EBT en algún momento durante los últimos 6 meses?
- YES ..... 1 (CONTINUE TO S5)  
 NO ..... 2 (GO TO S2 IF MORE THAN ONE FEMALE IN HH, OTHERWISE TERMINATE)  
 DON'T KNOW ..... DK (GO TO S2 IF MORE THAN ONE FEMALE IN HH, OTHERWISE TERMINATE)  
 REFUSED ..... REF (TERMINATE)
- Sí.....1  
 NO.....2  
 NO SÉ.....NS  
 RECHAZÓ.....RECH
- S6. To make sure we are interviewing a balanced group of Californians, I need to find out whether you are of Latino or Hispanic origin? (IF NEEDED:) such as Mexican- American, Latin American, South American, or Spanish-American?  
 S6. Para asegurarnos de que estemos entrevistando a un grupo balanceado de los californianos, necesito saber si ¿usted es de origen latino o hispano ((IF NEEDED:)) originaria de México , Estados Unidos, América Latina, América del Sur, Hispano-Americano ?
- YES, HISPANIC ..... 1  
 NO, NON-HISPANIC ..... 2  
 DON'T KNOW/NOT SURE ..... 8  
 REFUSED ..... 9  
 sí, HISPANA ..... 1  
 NO, NO HISPANA ..... 2  
 NO SÉ, NO ESTOY SEGURA ..... 8  
 RECHAZÓ ..... 9
- S7. For classification purposes, we'd like to know what your racial background is. Are you White, Black or African American, Asian, Pacific-Islander, American Indian or an Alaskan Native, a member of another race or a combination of races? (ALLOW MULTIPLE ANSWERS)  
 S7. A efectos de clasificación, nos gustaría saber cuál es su origen racial . ¿Es usted Blanca, Negra o Afro-americana, asiática, isleña del Pacífico, india americana o nativa de Alaska, miembro de otra raza o una combinación de razas? (ALLOW MULTIPLE ANSWERS)

WHITE.....	1
BLACK/AFRICAN-AMERICAN.....	2
ASIAN .....	3
PACIFIC ISLANDER.....	4
AMERICAN INDIAN/ALASKAN NATIVE .....	5
HISPANIC/LATINO (VOLUNTEER ONLY).....	6
OTHER RACE/ETHNICITY (.....)	7
(SPECIFY)	
DON'T KNOW.....	DK
REFUSED.....	REF
BLANCA 1.....	1
NEGRA / AFRO-AMERICANA 2.....	2
ASIÁTICA 3.....	3
DE LAS ISLAS DEL PACÍFICO 4.....	4
INDIA AMÉRICA / NATIVA DE ALASKA 5.....	5
HISPANA-LATINA (VOLUNTEER ONLY).....	6
OTRA RAZA / ETNIA (.....)	7
NO SÉ.....	NS
RECHAZÓ.....	RECH

## INVITATION INVITACIÓN

We are seeking women to participate in a research study about eating and physical activity. If you choose to participate, you will be asked to complete an interview that will take about 30-35 minutes. We are interested in your thoughts and opinions. The only risk involved will be in answering questions included in the interviews. There may be a benefit to you; many people find participation in surveys interesting and educational. You will also be contributing to scientific knowledge on health issues. You can choose not to answer any question and can stop participation at any time.

Estamos buscando a mujeres para participar en un estudio de investigación acerca de la actividad física y la alimentación. Si usted decide participar, se le pedirá que complete una entrevista que tomará alrededor de 30-35 minutos. Estamos interesados en sus ideas y opiniones. El único riesgo involucrado en esta encuesta será el responder a las preguntas incluidas en las entrevistas. Puede haber un beneficio para usted, ya que muchas personas encuentran que la participación en encuestas es interesante y educativa. También contribuirá al conocimiento científico en temas de salud. Usted puede optar por no contestar cualquier pregunta y puede dejar de participar en cualquier momento.

### INFORMED CONSENT SCRIPT

### GUIÓN DE CONSENTIMIENTO INFORMADO

- S8. Before I continue, I would like to remind you that everything you say is completely confidential. Your participation is totally voluntary. There will be no harmful effect on any public benefits you may receive if you decide not to participate or answer any of the questions. This is a research study being sponsored by the California Department of Public Health and the Public Health Institute. The purpose of the study is to improve programs and services for children and adults in California. If you have any questions about the survey, you may contact our survey supervisor, Eric Lopez, for additional information on our research. (1-877-267-7915).

This call may be monitored by my supervisor to ensure quality and courtesy.

S8. Antes de continuar, me gustaría recordarle que todo lo que usted diga es totalmente confidencial. Su participación es totalmente voluntaria. No habrá ningún efecto perjudicial sobre los beneficios públicos que usted pueda recibir si decide no participar o responder alguna de las preguntas. Se trata de un estudio de investigación patrocinado por el Departamento de Salud Pública de California y del Instituto de Salud Pública. El propósito del estudio es mejorar los programas y servicios para niños y adultos en California. Si usted tiene alguna pregunta acerca de la encuesta, puede comunicarse con nuestro supervisor de la encuesta, Eric Lopez, para obtener más información sobre nuestra investigación. (1-877-267-7915).

Esta llamada puede ser monitoreada por mi supervisor para asegurar la calidad y la cortesía.

- S9. Would you like to participate in an interview?

S9. ¿A usted le gustaría participar en una entrevista?

YES .....	1	(VERBAL CONSENT GIVEN)
NO, CALLBACK .....	2	(CALLBACK)
NO .....	3	(THANK AND TERMINATE)
DON'T KNOW .....	DK	(CALLBACK)
REFUSED .....	REF	(CODE AS SOFT OR HARD REFUSAL)
Sí .....	1	
NO, LLAME EN OTRA OCASIÓN .....	2	
NO .....	3	
NO SÉ .....	NS	
RECHAZÓ .....	RECH	

INTERVIEWER #  RESPONDENT #  DATE:

NORC at the University of Chicago  
Chicago, IL

## 2012 Benchmark Survey

### Questionnaire – Low-Income Mothers

**A1.** I'm going to describe some ads you may have seen outside on billboards, lunch trucks or other posters. Please tell me if you remember ever seeing them. (READ ITEM) Have you seen or not seen these ads? (ROTATE LIST)

	YES	NO	DON'T KNOW	REFUSED
( ) a. [HOW ABOUT] a sign that says "Our Community. Our Rules. Rule #4 Stand up for healthy changes" with a picture of two women smiling looking directly at you, one with her arms crossed?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
( ) b. [HOW ABOUT] a sign that says "My Shopping Cart. My Rules. Rule #5 Buy more fruits and vegetables" with a picture of a woman smiling looking directly at you.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
( ) c. [HOW ABOUT] a sign that says "My Budget. My Rules. Rule #6 Eat right when money's tight" with a picture of a smiling woman with her arms crossed looking directly at you.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>

**B1.** Now, I'm going to describe some ads you may have heard on the radio. Please tell me if you remember ever hearing them. (READ ITEM) Have you heard this ad? (ROTATE LIST)

	YES	NO	DON'T KNOW	REFUSED	DON'T LISTEN TO RADIO (VOL ONLY)
( ) a. [HOW ABOUT] A radio ad where a dad and his daughter say that they are making a healthy meal with help from CalFresh; and that CalFresh is the new name for the food stamp program in California. The spot ends by saying that if you or someone you know has a low income, call 1-877-847-3663 for information about CalFresh.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>	10 <input type="checkbox"/> SKIP TO C1
( ) b. [HOW ABOUT] A radio ad that begins with an announcer asking if you know that millions of Californians with low-income can get help buying food. The ad introduces CalFresh as the new name for the food stamp program in California and explains that many people qualify for CalFresh even if they have a job, bank account or a car. The spot ends by saying that to learn more, call 1-877-847-3663.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>	10 <input type="checkbox"/> SKIP TO C1

**C1.** I'm going to describe some TV ads to you. These TV ads show parents and children doing healthy things together, like playing actively in their living room, spending time together in the kitchen, preparing fruits and vegetables or sharing a healthy meal at a table in the backyard. Please tell me if you remember ever seeing them. **(READ ITEM, THEN ASK:)** Have you seen or not seen these ads? **(ROTATE LIST)**

	YES	NO	DON'T KNOW	REFUSED	DON'T WATCH TV (VOL ONLY)
( ) a. <b>[HOW ABOUT]</b> A TV ad where moms and dads are talking about how getting their kids to eat more fruits and vegetables is hard, but finding out that one of them has type 2 diabetes would be a lot harder; and how saying no to their kids when they want afternoon sweets is hard, but watching their child struggle with obesity would be a lot harder. The spot ends with a mom and a dad who say, "Realizing it was time for a change, now that wasn't very hard at all." <b>HAVE YOU SEEN OR NOT SEEN THIS TV AD?</b>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>	10 <input type="checkbox"/> <b>SKIP TO C2</b>
( ) b. <b>[HOW ABOUT]</b> A TV ad where moms and dads are talking about how saying no to their kids when they want to load up on greasy foods is hard, but seeing their kids get teased about their weight would be even harder; and how asking the local store to carry more fruits and vegetables can be hard, but finding out one of her kids has type 2 diabetes would be a lot harder. The spot ends with two moms who say, "Realizing it was time for a change, now that wasn't very hard at all." <b>HAVE YOU SEEN OR NOT SEEN THIS TV AD?</b>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>	10 <input type="checkbox"/> <b>SKIP TO C2</b>
( ) c. <b>[HOW ABOUT]</b> A TV ad that shows several parents talking about the problem of vending machines in their children's schools. One dad mentions that he worked with his parents' group and got vending machines banned from his daughter's school. At the end, one of the dads asks, "What are you doing in your local schools?" <b>HAVE YOU SEEN OR NOT SEEN THIS TV AD?</b>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>	10 <input type="checkbox"/> <b>SKIP TO C2</b>

**C1a. (ASK IF RECALL AT LEAST ONE OF THE ABOVE TELEVISION ADS)**

What was your reaction to the ad(s)? Was it mostly positive, mostly negative or neither positive nor negative?

POSITIVE .....1  
NEGATIVE .....2  
NEITHER POSITIVE OR NEGATIVE .....3 → **SKIP TO C1B**  
NO REACTION .....4 → **SKIP TO C1B**  
DON'T KNOW/NOT SURE ..... 77 → **SKIP TO C1B**  
REFUSED ..... 99 → **SKIP TO C1B**

**(a) (ASK IF POSITIVE OR NEGATIVE). And why is that? Why did you react that way?  
(PROBE FOR SPECIFICS AND MULTIPLE ANSWERS. ACCEPT UP TO 3)**

1. \_\_\_\_\_  
2. \_\_\_\_\_  
3. \_\_\_\_\_

**(b) Have you ever heard or read anything about a group called the Network for a Healthy California, the Champions for Change?**

YES .....1  
NO .....2  
DON'T KNOW/NOT SURE ..... 77  
REFUSED ..... 99

**(c) Did the ad(s) change your opinions in any way about Network for a Healthy California, the Champions for Change?**

YES .....1  
NO .....2  
DON'T KNOW/NOT SURE ..... 77  
REFUSED ..... 99

**(d) Have you talked to anyone about the ad(s)?**

YES .....1  
NO .....2  
DON'T KNOW/NOT SURE ..... 77  
REFUSED ..... 99

**C2. Have you ever visited the Champions for Change website, the website for the Network for a Healthy California?**

YES .....1  
NO .....2  
DON'T KNOW/NOT SURE ..... 77  
REFUSED ..... 99

**C3.** Next, please tell me if you agree or disagree with the following statements. (READ LIST) Do you agree or disagree? (THEN ASK:) Is this strongly or somewhat?

	STRONGLY AGREE	SOMEWHAT AGREE	NEITHER AGREE NOR DISAGREE (VOL. ONLY)	SOMEWHAT DISAGREE	STRONGLY DISAGREE	DON'T KNOW/ NOT SURE	REFUSED
( ) a. Eating fruit and vegetables does not reduce your risk of getting diseases like type 2 diabetes, cancer or heart disease.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
( ) b. Being physically active will help reduce your risk of getting diseases like diabetes, cancer or heart disease	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>

**C4.** According to national guidelines, how much of your plate should be filled with fruit and vegetables at meals? (PROBE FOR CLARITY. ACCEPT ONE ANSWER ONLY. RECORD VERBATIM UNLESS RESPONSE IS ONE HALF OR DON'T KNOW.)

\_\_\_\_\_ (RECORD AMOUNT OF PLATE FILLED)

ONE-HALF .....5

DON'T KNOW/NOT SURE ..... 77

REFUSED ..... 99

**C4a.** Are you aware of any government websites where you can get information on how much fruit and vegetables to eat?

YES .....1

NO .....2 → **SKIP TO C5**

DON'T KNOW/NOT SURE ..... 77 → **SKIP TO C5**

REFUSED ..... 99 → **SKIP TO C5**

**C4b.** What is the name of that website or websites? (RECORD EXACT WORDS) (PROBE FOR SPECIFIC NAME) (PROBE FOR MULTIPLE RESPONSES; ACCEPT UP TO THREE)

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

**C4c.** Have you ever heard or read anything about a website called "choosemyplate.gov"?

YES .....1

NO .....2

DON'T KNOW/NOT SURE ..... 77

REFUSED ..... 99

**C5.** Have you ever heard or read anything about the CalFresh Program?

YES .....1

NO .....2 → **SKIP TO D**

DON'T KNOW/NOT SURE ..... 77

REFUSED ..... 99

**C5a.** Are you aware that CalFresh is the new name for the food stamp program in California?

YES .....1

NO .....2

DON'T KNOW/NOT SURE ..... 77

REFUSED ..... 99

**These next questions are about the foods you usually eat or drink. Please tell me how often you eat or drink these items, for example, three times a day, twice a week, three times a month, and so forth. Remember, I am only interested in the foods you eat. Include all foods you eat, both at home and away from home.**

(FILL IN ONE BLANK OR CIRCLE ONE NUMBER)	(RECORD NUMBER)				NEVER	DON'T KNOW/ NOT SURE	REFUSED
	TIMES PER DAY	TIMES PER WEEK	TIMES PER MONTH	TIMES PER YEAR			
<b>D1.</b> How often do you drink 100% <u>pure</u> fruit juices? Do not include fruit flavored drinks with added sugar or fruit juice you make at home and add sugar to. Only include 100% juice. (100% JUICE BLENDS SUCH AS ORANGE-PINEAPPLE OR CRANBERRY-GRAPE ARE OK AS ARE FRUIT-VEGETABLE 100% BLENDS. 100% PURE JUICE FROM CONCENTRATE IS ALSO OK.) (DO NOT ALLOW RANGES) (PROBE FOR A SINGLE NUMBER)	—	—	—	—	5 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
<b>D2.</b> Not counting juice, how often do you eat fruit? Count fresh, frozen, canned and dried fruit. (DO NOT ALLOW RANGES) (PROBE FOR A SINGLE NUMBER)	—	—	—	—	5 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
<b>D3.</b> How often do you eat green salad? (DO NOT ALLOW RANGES) (PROBE FOR A SINGLE NUMBER)	—	—	—	—	5 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
<b>D4.</b> How often do you eat potatoes not including French fries, fried potatoes, or potato chips? (DO NOT ALLOW RANGES) (PROBE FOR A SINGLE NUMBER)	—	—	—	—	5 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
<b>D5.</b> How often do you eat carrots? (DO NOT ALLOW RANGES) (PROBE FOR A SINGLE NUMBER)	—	—	—	—	5 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
<b>D6.</b> Not counting carrots, potatoes, or green salad, how often to you eat <u>other</u> vegetables? Examples include tomatoes, tomato or V8 juice, corn, zucchini, peas, lettuce and cabbage. (DO NOT COUNT VEGETABLES ALREADY COUNTED) DO NOT ALLOW RANGES) (PROBE FOR A SINGLE NUMBER)	—	—	—	—	5 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>

	MORE	LESS	ABOUT SAME	DON'T KNOW/ NOT SURE	REFUSED
<b>D7.</b> Compared to one year ago, are you eating more <u>fruit</u> , less, or about the same?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
<b>D8.</b> Compared to one year ago, are you eating more <u>vegetables</u> , less, or about the same?	5 <input type="checkbox"/>	5 <input type="checkbox"/>	5 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>



**D9.** When you think about your plate at mealtimes, how much of your plate is usually filled with fruit and vegetables? (READ CATEGORIES)

[IF RESPONDENT REPLIES THAT FOOD IS MIXED, PLEASE RESPOND: "If you usually eat mixed food, take a guess at how much of it is fruits and vegetables"]

IF RESPONDENT IS UNSURE ASK THEM FOR THE RESPONSE THAT COMES CLOSEST TO BEING TRUE]

ONE FOURTH .....1  
 ONE THIRD.....2  
 ONE HALF .....3  
 THREE FOURTHS .....4  
 ALL.....5  
 NONE .....6

**DO NOT READ** { DON'T KNOW/NOT SURE..... 77  
 { REFUSED ..... 99

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*The next questions are about eating out at fast food or chain restaurants.*

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**D10.** Do you typically read calorie information for menu items when it is available at fast food or chain restaurants?

YES.....1  
 NO.....2 → **SKIP TO D13**

(VOLUNTEERED ONLY:)

NEVER NOTICED/NEVER LOOKED FOR IT .....3 → **SKIP TO D13**  
 USUALLY CANNOT FIND IT .....4 → **SKIP TO D13**  
 NEVER GO TO FAST FOOD OR CHAIN RESTAURANTS .....5 → **SKIP TO D13**

DON'T KNOW/NOT SURE ..... 77  
 REFUSED ..... 99

**D10a.** How often do the amount of calories on the menu help you decide what to order at fast food or chain restaurants? (READ CATEGORIES)

ALWAYS .....1  
 MOST OF THE TIME .....2  
 ABOUT HALF THE TIME .....3  
 SOMETIMES.....4  
 NEVER .....2

**DO NOT READ** { DON'T KNOW/NOT SURE..... 77  
 { REFUSED ..... 99

## Fruit and Vegetable Consumption – Self Efficacy

**D13.** These next statements are about eating fruit and vegetables, even when things may make it hard to. For each, please tell me how sure you are that you can do it, on a scale of 1 to 5, with 1 being not at all sure and 5 being extremely sure. If you fall somewhere in between, pick 2, 3, or 4. **(READ LIST THEN SAY, IF NECESSARY:)** On a scale of 1 to 5. 1 being not at all sure and 5 being extremely sure, **(ROTATE LIST)**.

	NOT AT ALL				EXTREMELY SURE	DON'T KNOW	REFUSED
( ) a. How sure are you that you could eat fruit or vegetables when in a hurry?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
( ) b. How sure are you that you could eat fruit or vegetables as part of your lunch on most days?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
( ) c. How sure are you that you could eat fruit or vegetables when eating away from home?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
( ) d. How sure are you that you could eat fruit or vegetables for dinner on most days?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
( ) e. How sure are you that you could eat a meal with half your plate full of fruit and vegetables most days?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
( ) f. How sure are you that you could eat other fruit or vegetables when your favorites are not available?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>

**The next few questions are about your work time, including work you do around the house.**

**E1.** Thinking about what you normally do during a typical work day, not counting your free time, which best describes your activity: Would you say that you sit most of the day, stand most of the day, or walk around a lot?

**(GET ONE RESPONSE ONLY) (IF NECESSARY, ASK: What do you do most often during a typical day? (IF RESPONDENT INSISTS ON MULTIPLE RESPONSES, CIRCLE MULTIPLE RESPONSES).**

SIT .....1  
 STAND .....2  
 WALK AROUND .....3  
 LAYS DOWN MOST OF THE TIME (**VOL ONLY**) .....4  
 DON'T KNOW ..... 77  
 REFUSED ..... 99

**E2.** Again, not counting what you do in your free time, in a typical work day do you usually lift or carry light loads, moderate loads or heavy loads, or do you usually not lift or carry things? **(IF NECESSARY, ASK: Which do you do most often?)**

LIGHT .....1  
 MODERATE .....2  
 HEAVY .....3  
 DO NOT LIFT OR CARRY .....4  
 DON'T KNOW/NOT SURE ..... 77  
 REFUSED ..... 99

**These next questions are about physical activity. By physical activity I mean activities that cause you to breathe harder or make your heart beat faster such as brisk walking, gardening, heavy yard work or fast dancing.**

(FILL IN ONE BLANK OR CIRCLE ONE NUMBER)	(RECORD TIME)			
	HOURS PER WEEK	MINUTES PER WEEK	DON'T KNOW/NOT SURE	REFUSED
<b>E3.</b> According to national guidelines, how much time each week should you be physically active to stay healthy? (PROBE FOR CLARITY. RECORD VERBATIM. IF NOT SURE, ASK TO PROVIDE BEST GUESS.)	—	—	77 <input type="checkbox"/>	99 <input type="checkbox"/>
<b>E4.</b> According to national guidelines, how much time each day should your (child) (children) be physically active to stay healthy? (PROBE FOR CLARITY.. RECORD VERBATIM IF NOT SURE, ASK TO PROVIDE BEST GUESS.)	—	—	77 <input type="checkbox"/>	99 <input type="checkbox"/>
<b>E5.</b> In a usual week are there any days when you are physically active for at least 10 minutes at a time? Think of your <u>free time only</u> , not work time or work around the house.				

ASK E6a YES..... 1  
 NO ..... 2  
 NO, PHYSICALLY DISABLED (VOL. ONLY) 3  
 DON'T KNOW/NOT SURE ..... 77  
 REFUSED ..... 99

SKIP TO E7

IF YES, ASK:

**E6a.** How many days per week are you active for at least 10 minutes?

ASK E6b (RECORD NUMBER):  
 \_\_\_\_\_ DAYS PER WEEK ..... 1  
 DID NOT DO ANY PHYSICAL ACTIVITY FOR AT LEAST 10 MINUTES AT A TIME ... 2

ASK E6b DON'T KNOW/NOT SURE ..... 77  
 REFUSED ..... 99

SKIP TO E7

IF AT LEAST ONE DAY A WEEK OR DK OR REF, ASK:

**E6b.** On days when you are physically active for at least 10 minutes in your free time, how much total time per day do you usually spend doing these activities? (RECORD # OF HOURS/MINUTES)

\_\_\_\_\_ HOURS PER DAY ..... 1  
 \_\_\_\_\_ MINUTES PER DAY ..... 2  
 DON'T KNOW/NOT SURE ..... 77  
 REFUSED ..... 99

## Physical Activity – Self Efficacy

**E7.** I'm going to read you a list of things people might do to increase or continue regular physical activity. Again, by physical activity I mean activities like brisk walking, bike riding, gardening, or fast dancing. Whether you are physically active or not, please rate how confident you are that you could really motivate yourself to do things like these most days in the work week, for at least six months. How sure are you that you can... (**READ LIST**)? Would you say "I know I can", "maybe I can," or "I know I cannot?"

(ROTATE LIST)

	I KNOW I CAN	MAYBE I CAN	I KNOW I CANNOT	NOT APPLICABLE (VOL. ONLY)	DON'T KNOW	REFUSED
( ) <b>a.</b> Set aside time for physical activity when undergoing a stressful life change (e.g. a divorce, death in family or moving).	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
( ) <b>b.</b> Set aside time for physical activity after a long, tiring day at work.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
( ) <b>c.</b> Set aside time for physical activity; that is, walking, jogging, swimming, biking, or other continuous activities for at least 2 and a half hours per week.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
( ) <b>d.</b> Set aside time for physical activity when your family is demanding more time from you.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
( ) <b>e.</b> Set aside time for physical activity even when you have excessive demands at work.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
( ) <b>f.</b> Set aside time for physical activity when you have chores to attend to.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>

**F1.** Tell me again, including yourself, how many people currently live in your home?

# OF PEOPLE: \_\_\_\_\_

DON'T KNOW/NOT SURE ..... 77

REFUSED ..... 99

**F2.** How many of these are children under age 18?

# OF CHILDREN UNDER AGE 18: \_\_\_\_\_

DON'T KNOW/NOT SURE ..... 77

REFUSED ..... 99

	NOT AT ALL	LESS THAN EVERY MONTH	EVERY MONTH	EVERY WEEK	EVERY DAY	DON'T KNOW/ NOT SURE	REFUSED	NOT APPLICABLE
<b>F3.</b> How often do you make it easy for (any of) (your) (child) (children) living in your home to eat fruit and vegetables, such as by having them washed, cut and ready to eat? Would you say not at all, less than every month, every month, every week, or every day?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>	10 <input type="checkbox"/>
<b>F4.</b> How often do you make it easy for (any of) (your) (child) (children) living in your home to be physically active, such as by taking them to sports practice, playing ball with them, or encouraging them to play outside or ride a bike? Would you say not at all, less than every month, every month, every week, or every day?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>	10 <input type="checkbox"/>
<b>F5.</b> About how often do you and your children do a physical activity together, such as playing ball, riding bikes, or taking a walk? Would you say not at all, less than every month, every month, every week, or every day? <b>(GET BEST ANSWER)</b>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>	10 <input type="checkbox"/>
<b>F6.</b> How often do you make it easy for (any of) (your) (child) (children) living in your home to drink water, such as by having a filled pitcher or bottles of water available? Would you say not at all, less than every month, every month, every week, or every day? <b>(GET BEST ANSWER)</b>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>	10 <input type="checkbox"/>

	YES	NO	DON'T KNOW/ NOT SURE	REFUSED
<b>F7.</b> Have you set limits on the amount of time that your child(ren) watch(es) television each day?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
<b>F8.</b> Have you set limits on the amount of "unhealthy food" you have in the home for your child(ren) to snack on? <b>(IF NEEDED, SAY:)</b> By unhealthy food, I mean things like chips, candy, and other sugary snacks.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
<b>F9.</b> Have you set limits on the amount of sweetened beverages you have in the home for children to drink? By sweetened beverages, I mean soda, sports drinks and sugar sweetened juice drinks.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
<b>F10.</b> Have you replaced sugary drinks with water for your family at meals or snacks?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>

**G1.** For the next statements, please tell me how sure you are that you can do each one, on a scale of 1 to 5 where 1 is not at all sure and 5 is extremely sure. If you fall somewhere in between, pick 2, 3, or 4. How sure are you that you could: (READ LIST). (IF NECESSARY, SAY:) on a scale of 1 to 5 with 1 being not at all sure and 5 being extremely sure?

(ROTATE LIST)

	NOT SURE AT ALL				EXTREMELY SURE	DON'T KNOW	REFUSED
( ) <b>b.</b> Buy fruits and vegetables even if you have to travel further to get them?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
( ) <b>c.</b> Get your family to eat fruits and vegetables at meals?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
( ) <b>d.</b> Set limits on the amount of junk foods like chips, candy, and sweets you have at home for the kids to snack on?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
( ) <b>e.</b> Set limits on the amount of soda or other sugary drinks you have at home?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
( ) <b>f.</b> Have fruits or vegetables washed, cut and ready to eat for your family to snack on?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
( ) <b>n.</b> Say "no" to your kids when they ask for afternoon sweets?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
( ) <b>g.</b> Get your family to eat a dinner together at least 5 times a week?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
( ) <b>h.</b> Take your children to the park, pool, or other places where they can be physically active even when you are busy with other responsibilities?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
( ) <b>i.</b> Encourage your children to ride a bike or play outside even when they have other things they want to do?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
( ) <b>j.</b> Do physical activity with your family even when you are tired after a long day at work?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
( ) <b>k.</b> Set limits on the amount of time that your children watch TV each day even if it makes them unhappy?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
( ) <b>l.</b> Apply for CalFresh (formerly the Food Stamps program) for your family even if it is something you have never considered before?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>

**G2.** For the next statements, we are interested in what you think other people you know are actually doing. For each, please tell me how many people you know... (READ LIST). Would you say few or none of the people you know, some people you know, most or all people you know? (ROTATE LIST)

	FEW / NONE	SOME	MOST/ALL	DON'T KNOW	REFUSED
( ) <b>a.</b> Eat enough fruit and vegetables every day?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
( ) <b>b.</b> Are physically active at least two and a half hours per week?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>

**G3.** For the next statements, we are interested in what you think other mothers you know are actually doing. For each, please tell me how many mothers you know... **(READ LIST)**. Would you say few or none of the mothers you know, some mothers you know, most or all mothers you know?

(ROTATE LIST)	FEW / NONE	SOME	MOST/ALL	DON'T KNOW	REFUSED
( ) a. Make it easy for their children to eat fruit and vegetables every day?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
( ) b. Make it easy for their children to be physically active every day?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
( ) c. Set limits on the amount of time their children watch television each day?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
( ) d. Set limits on the amount of "unhealthy food" they have in the home for children to snack on? <b>(IF NEEDED, SAY:)</b> By unhealthy food, I mean things like chips, candy and other sugary snacks and drinks.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
( ) e. Set limits on the amount of sweetened beverages they have in the home for children to drink, beverages like soda, sports drinks and sugar sweetened juice drinks.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>

**G4.** These next statements are about physical activity. By physical activity I mean activities that cause you to breathe harder or make your heart beat faster such as brisk walking, gardening, heavy yard work or fast dancing. Please tell me how sure you are that you can get regular physical activity in each situation, on a scale of 1 to 5 where 1 is not at all sure and 5 is extremely sure. If you fall somewhere in between, pick 2, 3, or 4. How sure are you that you can get regular physical activity: **(READ LIST)**. **(IF NECESSARY, SAY:)** on a scale of 1 to 5 with 1 being not at all sure and 5 being extremely sure?

(ROTATE LIST)	NOT SURE AT ALL	1	2	3	4	5	EXTREMELY SURE	DON'T KNOW	REFUSED
( ) a. When you are tired?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>		
( ) b. When you are in a bad mood?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>		
( ) c. When you feel you don't have the time?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>		
( ) d. When you are on vacation?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>		
( ) e. When its raining or cold?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>		

**G5.** I am going to read you a couple of statements about getting enough fruit and vegetables and being physically active. For each, please tell me if you agree or disagree. **(READ LIST)** Do you agree or disagree? **(THEN ASK:)** Is this strongly or somewhat? **(ROTATE LIST)**

	STRONGLY AGREE	SOMEWHAT AGREE	NEITHER AGREE NOR DISAGREE (VOL. ONLY)	SOMEWHAT DISAGREE	STRONGLY DISAGREE	DON'T KNOW/ NOT SURE	REFUSED
( ) f. I can't find good, fresh fruit and vegetables in my neighborhood.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
( ) a. I can't find places to be physically active.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>

***Now I would like to ask you a few questions about activities you may have taken part in the last 3 months.***

	YES	NO	DON'T KNOW/ NOT SURE	REFUSED
<b>H1.</b> In the last 3 months, have you taken part in a class, workshop or other group activity about eating fruit and vegetables or being physically active?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
<b>H2.</b> In the last 3 months, have you seen someone doing a live food demonstration, one where they prepared a recipe with fruits or vegetables?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
<b>H3.</b> In the last 3 months, (have any of your children) (has your child) brought home information about eating fruit and vegetables or being physically active?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
<b>H4.</b> In the last 3 months, have you seen any other written information recommending fruit and vegetables or being physically active, things like signs, posters or brochures?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
<b>H5a.</b> In the last 3 months, have you attended a festival, celebration or health fair in your community?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
<b>IF H5A IS YES, ASK:</b>				
<b>H5b.</b> At that festival, celebration or health fair, did you take part in any activities that were about eating fruit and vegetables or being physically active?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>

***The next questions are about where you work and what types of activities you do on the job. For each question, please consider work done outside of the home.***

**I1A.** Does your employer provide any nutrition-related benefits? I mean things like nutrition classes, fruit and vegetable snacks, healthy foods during meetings, health foods in vending machines, or discounts on healthy food choices in the worksite cafeteria?

YES.....1  
 NO.....2  
 NOT APPLICABLE, NOT EMPLOYED.....7 → **SKIP TO J**  
 DON'T KNOW/NOT SURE.....77  
 REFUSED .....99

**IF YES, ASK:**

**I1b.** In the last 12 months, did you use any of these nutrition related benefits?

YES.....1  
 NO.....2  
 DON'T KNOW/NOT SURE.....77  
 REFUSED .....99



**I2a.** Does your employer provide any physical fitness benefits? I mean things like exercise classes, release time for physical activity, walking clubs, stairwell promotions, or discount health club memberships?

YES.....1  
 NO.....2  
 NOT APPLICABLE, NOT EMPLOYED.....7  
 DON'T KNOW/NOT SURE.....77  
 REFUSED .....99

**IF YES, ASK:**

**I2b.** In the last 12 months, did you use any of these physical fitness benefits?

YES.....1  
 NO.....2  
 DON'T KNOW/NOT SURE.....77  
 REFUSED .....99

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**Finally, some background questions about yourself....**

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**J1a.** How old are you?

RECORD AGE: \_\_\_\_\_ → **SKIP TO J2**  
 DON'T KNOW .....77  
 REFUSED .....99 } **GO TO J1B**

**IF REFUSED OR DON'T KNOW, ASK:**

**J1b.** We don't need to know exactly, but generally speaking are you between ages...  
 (READ CATEGORIES)?

18-24 .....1  
 25-29 .....2  
 30-39 .....3  
 40-49 .....4  
 50-55 .....5

DO NOT READ → REFUSED .....99

**J2.** What is the highest year of school that you have finished or gotten credit for? (IF 4 YEARS OF COLLEGE, ASK:) Did you graduate and receive a bachelor's degree?

LESS THAN HIGH SCHOOL .....1  
 HIGH SCHOOL GRADUATE/GED .....2  
 SOME COLLEGE .....3  
 COLLEGE GRADUATE (BA/BS/MASTER'S/PH.D.) .....4  
 DON'T KNOW .....77  
 REFUSED .....99

**J3a.** Do you speak any languages fluently other than English?

<b>ASK J3b</b>	YES, SPANISH .....	1
	YES, OTHER LANGUAGE .....	2
	NO .....	3
	DON'T KNOW/NOT SURE .....	77
	REFUSED .....	99

} SKIP TO J4

IF YES, ASK:

**J3b.** What language(s) do you usually speak at home? (READ LIST) (SELECT ONE ANSWER)

ENGLISH ONLY .....	1
MORE ENGLISH THAN SPANISH .....	2
BOTH EQUALLY .....	3
MORE SPANISH THAN ENGLISH .....	4
SPANISH ONLY .....	5
DO NOT READ → DON'T KNOW .....	77
DO NOT READ → REFUSED .....	99

**J4.** Do you have access to the internet, either at home or another location, at least once a week?

YES .....	1
NO .....	2
DON'T KNOW/NOT SURE .....	77
REFUSED .....	99

**J5.** Do you currently use a smart phone for email and the web?

YES .....	1
NO .....	2
DON'T KNOW/NOT SURE .....	77
REFUSED .....	99

**J6.** Have you ever created your own profile online that others can see, like on a social networking site such as MySpace, Facebook or LinkedIn.com?

YES .....	1
NO .....	2
DON'T KNOW/NOT SURE .....	77
REFUSED .....	99

} SKIP TO J9

IF J6 = YES, ASK:

**J7a.** On which social networking site(s) is your profile? (READ LIST AND ASK IF THERE ARE ANY OTHERS THEY USE) (ANSWER MAY BE A MULTIPLE)

FACEBOOK .....	1
MYSpace .....	2
TWITTER .....	3
YAHOO .....	4
YOUTUBE .....	5
OTHER (SPECIFY) .....	6
OTHER (SPECIFY) .....	7
DO NOT READ → DON'T KNOW/NOT SURE .....	77
DO NOT READ → REFUSED .....	99

**J7b.** How often do you visit the site where you have a profile? (if they have a profile on multiple sites, ask them to answer in terms of site they visit most often (READ LIST).)

SEVERAL TIMES A DAY .....1  
 ABOUT ONCE A DAY .....2  
 EVERY FEW DAYS .....3  
 ONCE A WEEK .....4  
 LESS OFTEN .....5

DO NOT READ → DON'T KNOW/NOT SURE ..... 77

DO NOT READ → REFUSED ..... 99

**J8.** How do you most often access your social networking profile? (READ LIST) (SELECT ONE ANSWER)

HOME COMPUTER .....1  
 SCHOOL COMPUTER .....2  
 WORK COMPUTER .....3  
 LIBRARY COMPUTER .....4  
 CELL PHONE OR MOBILE DEVICE .....5  
 OTHER (SPECIFY) .....6

DO NOT READ → DON'T KNOW/NOT SURE ..... 77

DO NOT READ → REFUSED ..... 99

**J9.** Do you consider yourself to be overweight, underweight, or about average for your height?

OVERWEIGHT .....1  
 UNDERWEIGHT .....2  
 ABOUT AVERAGE .....3  
 DON'T KNOW/NOT SURE ..... 77  
 REFUSED ..... 99

**J13.** About how much do you weigh without shoes?

(ENTER WEIGHT IN WHOLE POUNDS; ROUND FRACTIONS UP) (VERIFY IF LESS THAN 80 OR MORE THAN 350)

\_\_\_\_\_ POUNDS

DON'T KNOW/NOT SURE ..... 77

REFUSED ..... 99

**J14.** About how tall are you without shoes? (ENTER HEIGHT IN FEET AND INCHES; EXAMPLE: 5 FEET 11 INCHES = 511)  
 (ROUND FRACTIONS DOWN) (VERIFY IF LESS THAN 408 OR GREATER THAN 608)

\_\_\_\_\_ FEET/INCHES

DON'T KNOW/NOT SURE ..... 77

REFUSED ..... 99

	YES	NO	DON'T KNOW/NOT SURE	REFUSED
a. Have you ever been told that you have type-2 diabetes?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
b. Has anyone in your immediate family ever been told that they have type-2 diabetes? (IF NECESSARY: By immediate family I mean you, your husband/partner, your parents, your husband/partner's parents, and your children.)	1 <input type="checkbox"/>	2 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
c. Have you even been told that you have heart disease?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
d. Has anyone in your immediate family ever been told that they have heart disease?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
e. Have you ever been told that you have high blood pressure?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
f. Has anyone else in your immediate family ever been told that they have high blood pressure?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>

**J15.** What is your current ZIP code?

--	--	--	--	--

DON'T KNOW ..... 77  
 REFUSED ..... 99

**J16.** Do any of your school-age children receive free or reduced price school meals?

YES.....1  
 NO.....2  
 NO, CHILDREN ARE NOT IN SCHOOL .....3  
 DON'T KNOW/NOT SURE.....77  
 REFUSED ..... 99

**J17.** Do you have a child age 5 or under?

YES.....1 → **GO TO J18**  
 NO.....2  
 DON'T KNOW/NOT SURE.....77  
 REFUSED ..... 99

**IF YES, ASK:**

**J18.** Have you used the WIC program in the last 12 months? (IF NECESSARY, SAY: WIC is a supplemental nutrition program for women, infants and children.)

YES.....1  
 NO.....2  
 DON'T KNOW/NOT SURE.....77  
 REFUSED ..... 99

**Those are all of my questions. Thank you very much for your help with this important survey.**

## Verification Information (Ask Respondent)

MALL ID: \_\_\_\_\_

**V1.** [V1] Would you please tell me what your telephone number is? A supervisor will call you in the next couple of days to verify that you participated in this interview and that you received \$15. Other than that, nobody will contact you.

[a] a. Telephone number? HOME (\_\_\_\_\_) \_\_\_\_\_  
(NO PAGERS) AREA CODE

CELL (\_\_\_\_\_) \_\_\_\_\_  
AREA CODE

[b] b. And your name please? \_\_\_\_\_  
(RESPONDENT'S NAME) FIRST NAME LAST NAME

[c] c. And the city and state where you live? \_\_\_\_\_  
CITY STATE

[d] d. Respondent's signature: \_\_\_\_\_  
(RESPONDENT'S SIGNATURE)

[e] e. Those are all my questions. Thank you very much.

REVIEW SCREENER AND QUESTIONNAIRE FOR COMPLETENESS ..... ☐

GIVE RESPONDENT \$15 COOPERATION FEE AND ASK RESPONDENT TO SIGN RECEIPT ..... ☐

**V2.** [V2] RECORD DATE OF INTERVIEW: DATE \_\_\_\_\_

**V3.** [V3] ATTACH SCREENER TO **BACK** OF QUESTIONNAIRE ..... ☐

**V4.** [V4] INTERVIEWER ID # \_\_\_\_\_

**V5.** [V5] I hereby certify that the information contained in this questionnaire is a true and accurate record of this respondent's comments as they were given to me.

\_\_\_\_\_  
INTERVIEWER SIGNATURE DATE

**V6.** [V7] \_\_\_\_\_  
SUPERVISOR SIGNATURE DATE

INTERVIEWER #  RESPONDENT #  DATE:

NORC at the University of Chicago  
Chicago, IL

## 2012 Benchmark Survey

### Questionnaire – Low-Income Mothers

**A1.** Voy a describirle algunos anuncios que usted pudo haber visto afuera en los carteles publicitarios, en camiones de almuerzo o 'loncheras' u otros pósters. Por favor dígame si usted recuerda haberlos visto. **(READ ITEM)** ¿Usted ha visto o no ha visto estos anuncios? **(ROTATE LIST)**

	YES	NO	DON'T KNOW	REFUSED
( ) a. Un letrero que dice "A palabras necias oídos sordos. Regla # 7 Piden dulces; les doy fruta" con una foto de una mamá y su hijo sonrientes mirándola a usted directamente.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
( ) b. Un letrero que dice "Madre prevenida vale por dos. Regla # 8 Sirvo más fruta y verdura" con una foto de una mujer sonriente con los brazos cruzados mirándola a usted directamente.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
( ) c. Un letrero que dice "Comer a medida alarga la vida. Regla # 9 Sirvo menos comida grasosa" con una foto de una mujer sonriente mirándola a usted directamente.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>

**B1.** Ahora, voy a describirle algunos anuncios que usted pudo haber oído en la radio. Por favor dígame si usted recuerda alguna vez haberlos oído. **(READ ITEM)** ¿Usted ha oído este anuncio? **(ROTATE LIST)**

	YES	NO	DON'T KNOW	REFUSED	DON'T LISTEN TO RADIO (VOL ONLY)
( ) b. Un anuncio de radio que comienza con un locutor que le pregunta a usted si sabe que millones de californianos con bajos ingresos pueden obtener ayuda para comprar alimentos. El anuncio presenta CalFresh como el nuevo nombre para el Programa de Estampillas de Comida en California y explica que muchas personas califican para CalFresh aunque tengan un trabajo, cuenta bancaria o un coche. El anuncio termina diciendo que para saber más, llame al 1-888-9-COMIDA.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>	10 <input type="checkbox"/> <b>SKIP TO C1</b>
( ) c. Un anuncio de radio que comienza con un niño diciéndole a la abuela que a regresado del supermercado con sus padres. La madre le comenta a la abuelita que siguió el consejo a solicita CalFresh. Un anunciador después explica que CalFresh es un nuevo nombre para el Programa de Estampillas para Alimentos en California y explica que muchos como usted o miembros de su familia pueden calificar para CalFresh. El anuncio termina diciendo que para más información, llame al 1-888-9-COMIDA.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>	10 <input type="checkbox"/> <b>SKIP TO C1</b>

	YES	NO	DON'T KNOW	REFUSED	DON'T LISTEN TO RADIO (VOL ONLY)
( ) a. ¿Un anuncio de radio con un mariachi femenino cantando sobre las cualidades nutritivas y saludables de las frutas y verduras para sus hijos? La música es de la famosa canción ranchera, <i>El Rey</i> . Ellas cantan acerca de ser la reina de la cocina, su palabra es ley. Al final, el locutor recomienda comer más frutas y verduras y hacer ejercicio todos los días.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>	10 <input type="checkbox"/> <b>SKIP TO C1</b>
( ) b. ¿Un anuncio de radio con un mariachi femenino cantando acerca de las madres protectoras como un ejemplo para California, mujeres totalmente dedicadas y muy queridas que son campeonas para sus preciosos hijos? La música es de la famosa canción ranchera, <i>Ay, Jalisco no te rajes</i> . Ellas cantan acerca de nunca darse por vencidas. Al final, el locutor recomienda comer más frutas y verduras y hacer ejercicio todos los días.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>	10 <input type="checkbox"/> <b>SKIP TO C1</b>
( ) c. ¿Un anuncio de radio con cantantes de un mariachi femenino cantando acerca de ser campeonas para sus hijos, a las que les gusta todo tipo de frutas y verduras y logran que sus niños sean físicamente activos? La música es de la canción estilo huapango, <i>Yo el aventurero</i> . Un locutor recomienda comer más frutas y verduras y hacer actividad física todos los días. Al final, las cantantes tratan de motivar a los oyentes a comunicarse con la Red para obtener información acerca de cómo usar los cupones para comprar alimentos más saludables a bajo costo.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>	10 <input type="checkbox"/> <b>SKIP TO C1</b>
( ) d. ¿Un anuncio de radio con un mariachi masculino? Ellos cantan acerca de ser el jefe de la familia y la necesidad de ser cumplidores. Ellos cantan sobre el amor a la comida rápida y botanas poco saludables, pero uno que es un padre y dice que él tuvo que dejar de comer ese tipo de comidas cuando notó que su hija se estaba poniendo gordita. Dijo que los papás necesitan poner el buen ejemplo a sus hijos. Y la música es de una famosa canción ranchera.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>	10 <input type="checkbox"/> <b>SKIP TO C1</b>

**C1.** Voy a describirle a usted algunos anuncios de televisión. Estos anuncios de televisión muestran a los padres y niños haciendo cosas saludables juntos, como jugar activamente en su sala, pasar tiempo juntos en la cocina, preparar las frutas y verduras o compartir una comida saludable en una mesa en el patio de atrás. Por favor dígame si usted recuerda haberlos visto. **(READ ITEM, THEN ASK:)** ¿Usted ha visto o no ha visto estos anuncios? **(ROTATE LIST)**

	YES	NO	DON'T KNOW	REFUSED	DON'T WATCH TV (VOL ONLY)
( ) a. Un anuncio de televisión donde las mamás y los papás están hablando de lo duro que es lograr que sus hijos coman más frutas y verduras, pero sería mas difícil saber que uno de sus hijos tiene diabetes tipo 2, y lo duro que es decirle que no a sus niños cuando quieren dulces en las tardes, pero ver a su hijo con problemas de obesidad sería mucho más duro. El anuncio termina con una mamá y un papá que dicen: "Saber que era hora de cambiar las cosas, eso no fue tan duro." <b>¿USTED HA VISTO O NO VISTO ESTE ANUNCIO DE TELEVISIÓN?</b>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>	10 <input type="checkbox"/> <b>SKIP TO C2</b>
( ) b. Un anuncio de televisión donde las mamás y los papás están hablando de lo duro que es decirle no a sus hijos cuando quieren comer alimentos grasosos, pero más duro sería ver que les hagan burla por gorditos. También dice que pedirle a la tienda local que tenga más frutas y verduras podría ser duro, pero enterarse de que uno de sus hijos tiene diabetes tipo 2 sería mucho más duro. El anuncio termina con dos mamás que dicen: "Saber que era hora de cambiar las cosas, eso no fue tan duro." <b>¿USTED HA VISTO O NO HA VISTO ESTE ANUNCIO DE TELEVISIÓN?</b>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>	10 <input type="checkbox"/> <b>SKIP TO C2</b>
( ) c. Un anuncio de televisión que muestra a varios padres que hablan sobre el problema de las máquinas expendedoras en las escuelas de sus hijos. Un padre menciona que él trabajó con el grupo de padres y lograron que se prohibieran las máquinas expendedoras en la escuela de su hija. Al final, uno de los papás le pregunta: "¿Qué está haciendo usted en su escuela local?" <b>¿USTED HA VISTO O NO HA VISTO ESTE ANUNCIO DE TELEVISIÓN?</b>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>	10 <input type="checkbox"/> <b>SKIP TO C2</b>



**C1a. (ASK IF RECALL AT LEAST ONE OF THE ABOVE TELEVISION ADS)**

¿Cuál fue su reacción al (los) anuncio (s)? ¿Fue muy positiva, muy negativa o ni positiva ni negativa.

POSITIVE .....1  
NEGATIVE .....2  
NEITHER POSITIVE OR NEGATIVE .....3 → **SKIP TO C1B**  
NO REACTION .....4 → **SKIP TO C1B**  
DON'T KNOW/NOT SURE .....77 → **SKIP TO C1B**  
REFUSED .....99 → **SKIP TO C1B**

**(a) (ASK IF POSITIVE OR NEGATIVE). ¿Y por qué es eso? ¿Por qué reaccionó de esa manera? (PROBE FOR SPECIFICS AND MULTIPLE ANSWERS. ACCEPT UP TO 3)**

1. \_\_\_\_\_  
2. \_\_\_\_\_  
3. \_\_\_\_\_

**(b) ¿Alguna vez usted ha escuchado o ha leído algo acerca de un grupo llamado la Red para una California Saludable, los Campeones del Cambio?**

YES .....1  
NO .....2  
DON'T KNOW/NOT SURE .....77  
REFUSED .....99

**(c) ¿El anuncio cambió su opinión en forma alguna acerca de la Red para una California Saludable, los Campeones del Cambio?**

YES .....1  
NO .....2  
DON'T KNOW/NOT SURE .....77  
REFUSED .....99

**(d) ¿Ha hablado con alguien sobre el/los anuncio(s)?**

YES .....1  
NO .....2  
DON'T KNOW/NOT SURE .....77  
REFUSED .....99

**C2. ¿Alguna vez usted ha visitado el sitio Web de los Campeones del Cambio, o el sitio Web de la Red para una California Saludable?**

YES .....1  
NO .....2  
DON'T KNOW/NOT SURE .....77  
REFUSED .....99

**C3.** A continuación, por favor dígame si usted está de acuerdo o en desacuerdo con las siguientes frases. (READ LIST:) ¿Está usted de acuerdo o en desacuerdo? (THEN ASK:) ¿Sería totalmente o algo?

	STRONGLY AGREE	SOMEWHAT AGREE	NEITHER AGREE NOR DISAGREE (VOL. ONLY)	SOMEWHAT DISAGREE	STRONGLY DISAGREE	DON'T KNOW/ NOT SURE	REFUSED
( ) a. Comer frutas y verduras no reduce el riesgo de contraer enfermedades como la diabetes tipo 2, cáncer o enfermedades del corazón.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
( ) b. La actividad física ayuda a reducir el riesgo de contraer enfermedades como la diabetes, el cáncer o enfermedades del corazón.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>

**C4.** De acuerdo con las directivas nacionales, ¿qué porción de su plato debe contener frutas y verduras en las comidas? (PROBE FOR CLARITY. ACCEPT ONE ANSWER ONLY. RECORD VERBATIM UNLESS RESPONSE IS ONE HALF OR DON'T KNOW.)

\_\_\_\_\_ (RECORD AMOUNT OF PLATE FILLED)

ONE-HALF .....5

DON'T KNOW/NOT SURE ..... 77

REFUSED ..... 99

**C4a.** ¿Tiene usted conocimiento acerca de los sitios Web del gobierno, donde se puede obtener información sobre la cantidad de frutas y verduras que debe comer?

YES.....1

NO.....2 → **SKIP TO C5**

DON'T KNOW/NOT SURE ..... 77 → **SKIP TO C5**

REFUSED ..... 99 → **SKIP TO C5**

**IF YES, ASK:**

**C4b.** ¿Cuál es el nombre de ese sitio Web o sitios Web? (RECORD EXACT WORDS)  
(PROBE FOR SPECIFIC NAME) (PROBE FOR MULTIPLE RESPONSES; ACCEPT UP TO THREE)

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

**C4c.** ¿Alguna vez ha escuchado o ha leído algo acerca de un sitio Web llamado "choosemyplate.gov?"

YES.....1

NO .....2

DON'T KNOW/NOT SURE ..... 77

REFUSED ..... 99

**C5.** ¿Usted ha oído hablar del Programa CalFresh?

YES.....1

NO.....2 → **SKIP TO D**

DON'T KNOW/NOT SURE ..... 77

REFUSED ..... 99

**C5a. EN CASO AFIRMATIVO, ¿Sabe usted que CalFresh es el nuevo nombre para las Estampillas de Comida en California?**

YES.....1  
 NO.....2  
 DON'T KNOW/NOT SURE.....77  
 REFUSED .....99

**Las preguntas que siguen son acerca de las cosas que usted usualmente come o bebe. Por favor, dígame con qué frecuencia come o bebe usted estos productos, por ejemplo, tres veces al día, dos veces por semana, tres veces al mes, y así sucesivamente. Recuerde, sólo estoy interesado en los alimentos que usted come y bebe. Incluya todos los alimentos que usted come, tanto en casa como fuera de casa.**

(FILL IN ONE BLANK OR CIRCLE ONE NUMBER)	(RECORD NUMBER)				NEVER	DON'T KNOW/ NOT SURE	REFUSED
	TIMES PER DAY	TIMES PER WEEK	TIMES PER MONTH	TIMES PER YEAR			
<b>D1.</b> ¿Con qué frecuencia bebe usted jugo de fruta 100% natural? No incluya las bebidas con sabor a frutas y azúcar añadido o jugo de fruta que usted hace en casa y al que usted agrega azúcar. Sólo incluya jugo 100% natural. (100% JUICE BLENDS SUCH AS ORANGE-PINEAPPLE OR CRANBERRY-GRAPE ARE OK AS ARE FRUIT-VEGETABLE 100% BLENDS. 100% PURE JUICE FROM CONCENTRATE IS ALSO OK.) (DO NOT ALLOW RANGES) (PROBE FOR A SINGLE NUMBER)	—	—	—	—	5 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
<b>D2.</b> Sin contar los jugos, ¿con qué frecuencia come usted fruta? Ya sea fruta fresca, congelada, enlatada y seca. (DO NOT ALLOW RANGES) (PROBE FOR A SINGLE NUMBER)	—	—	—	—	5 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
<b>D3.</b> ¿Con qué frecuencia come usted ensaladas verdes? (DO NOT ALLOW RANGES) (PROBE FOR A SINGLE NUMBER)	—	—	—	—	5 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
<b>D4.</b> ¿Con qué frecuencia come usted papas, sin incluir papas a la francesa, papas fritas o papitas? (DO NOT ALLOW RANGES) (PROBE FOR A SINGLE NUMBER)	—	—	—	—	5 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
<b>D5.</b> ¿Con qué frecuencia come usted zanahorias? (DO NOT ALLOW RANGES) (PROBE FOR A SINGLE NUMBER)	—	—	—	—	5 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
<b>D6.</b> Sin contar las zanahorias, papas o ensalada verde, ¿con qué frecuencia come usted otras verduras? Algunos ejemplos incluyen tomates, jugo de tomate o jugo V8, maíz, calabacín, chícharos, lechuga y repollo. (DO NOT COUNT VEGETABLES ALREADY COUNTED) (DO NOT ALLOW RANGES) (PROBE FOR A SINGLE NUMBER)	—	—	—	—	5 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
<b>D7.</b> Comparado con el año pasado, ¿usted está comiendo más fruta, menos fruta o casi la misma cantidad de <u>fruta</u> ?	MORE 1 <input type="checkbox"/>	LESS 2 <input type="checkbox"/>	ABOUT SAME 3 <input type="checkbox"/>	DON'T KNOW/ NOT SURE 77 <input type="checkbox"/>	REFUSED 99 <input type="checkbox"/>		

**D8.** Comparado con el año pasado, ¿usted está comiendo más verdura, menos verdura o casi la misma cantidad de verdura?

5 ☐

5 ☐

5 ☐

77 ☐

99 ☐

**D9.** Cuando usted piensa en su plato durante las comidas, ¿qué porción de su plato generalmente contiene fruta y verdura? (READ CATEGORIES)

[IF RESPONDENT REPLIES THAT FOOD IS MIXED, PLEASE RESPOND: "Si usualmente comer comida mixtada, ¿puede adivinar que tanto de cantidad son frutas y verduras?"]

[IF RESPONDENT IS UNSURE ASK THEM FOR THE RESPONSE THAT COMES CLOSEST TO BEING TRUE]

UN CUARTO .....1  
 UN TERCIO .....2  
 LA MITAD .....3  
 TRES CUARTOS .....4  
 TODO .....5  
 NUNCA .....6

**DO  
NOT  
READ**

{ DON'T KNOW/NOT SURE ..... 77  
 { REFUSED ..... 99

**Las preguntas que siguen son acerca de comer en restaurantes de comida rápida o en restaurantes de cadena.**

**D10.** ¿Usted normalmente lee información sobre las calorías de las comidas del menú cuando está disponible en los restaurantes de comida rápida o de cadena?

YES .....1  
 NO .....2

(VOLUNTEERED ONLY:)

NEVER NOTICED/NEVER LOOKED FOR IT .....3  
 USUALLY CANNOT FIND IT .....4  
 NEVER GO TO FAST FOOD OR CHAIN RESTAURANTS .....5

→ SKIP TO D13

DON'T KNOW/NOT SURE ..... 77  
 REFUSED ..... 99

IF YES, ASK:

**D10a.** ¿Leyendo la cantidad de calorías en el menú le ayuda frecuentemente a decidir qué pedir en los restaurantes de comida rápida o de cadena? (READ CATEGORIES)

SIEMPRE .....1  
 LA MAYORÍA DEL TIEMPO .....2  
 CASI LA MITAD DEL TIEMPO .....3  
 A VECES .....4  
 NUNCA .....5

**DO  
NOT  
READ**

{ DON'T KNOW/NOT SURE ..... 77  
 { REFUSED ..... 99

## Fruit and Vegetable Consumption – Self Efficacy

### Consumo de Frutas y Verduras – Autoeficacia

**D13.** Las frases siguientes se refieren al consumo de frutas y verduras, aún cuando puede ser difícil comerlas. Para cada una, por favor dígame ¿qué tan segura está de que usted puede comerlas, en una escala del 1 al 5, donde el 1 significa no estar nada segura y 5 es estar muy segura. Si usted cae en algún punto intermedio, elija 2, 3, o 4. (READ LIST THEN SAY, IF NECESSARY:) En una escala del 1 al 5, Siendo 1 el estar nada segura y el 5 estar muy segura, (ROTATE LIST).

	NOT AT ALL				EXTREMELY SURE	DON'T KNOW	REFUSED
( ) a. ¿Qué tan segura está usted de que pueda comer frutas o verduras cuando está anda de prisa?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
( ) b. ¿Qué tan segura está usted de que pueda comer frutas o verduras como parte de su almuerzo casi todos los días?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
( ) c. ¿Qué tan segura está usted de que pueda comer frutas o verduras cuando coma fuera de casa?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
( ) d. ¿Qué tan segura está usted de que pueda comer frutas o verduras en la cena la mayoría de los días?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
( ) e. ¿Qué tan segura está usted de que pueda comer una comida con la mitad de su plato servido de frutas y verduras la mayoría de los días?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
( ) f. ¿Qué tan segura está usted de que pueda comer otras frutas o verduras cuando sus favoritas no están disponibles?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>

**Las siguientes preguntas son acerca de su tiempo de trabajo, incluyendo el trabajo que usted hace en la casa.**

**E1.** Pensando en lo que usted normalmente hace durante un día de trabajo, sin contar el tiempo libre, ¿qué describe mejor su actividad?: ¿Diría usted que está sentada casi todo el día, que está de pie la mayor parte del día, o que camina mucho?  
(GET ONE RESPONSE ONLY) (IF NECESSARY, ASK:) ¿Qué es lo que usted hace con mayor frecuencia durante un día normal? (IF RESPONDENT INSISTS ON MULTIPLE RESPONSES, CIRCLE MULTIPLE RESPONSES).

SIT .....1  
 STAND .....2  
 WALK AROUND .....3  
 LAYS DOWN MOST OF THE TIME (VOL ONLY) .....4  
 DON'T KNOW ..... 77  
 REFUSED ..... 99

**E2.** Una vez más, sin contar lo que usted hace en su tiempo libre, en un día típico de trabajo suele levantar o transportar cargas ligeras, cargas moderadas o cargas pesadas, o usted no suele levantar o cargar cosas? (IF NECESSARY, ASK: Qué es lo que usted hace con mayor frecuencia durante un día normal?)

LIGHT .....1  
 MODERATE .....2  
 HEAVY .....3  
 DO NOT LIFT OR CARRY .....4  
 DON'T KNOW/NOT SURE ..... 77  
 REFUSED ..... 99

**Las siguientes preguntas son acerca de su actividad física. Por actividad física me refiero a actividades que le causan respirar más fuerte o hacer que su corazón lata más rápido, como caminar rápidamente, jardinería, trabajos pesados en el jardín o bailar rápido.**

(FILL IN ONE BLANK OR CIRCLE ONE NUMBER)	(RECORD TIME)		DON'T KNOW/ NOT SURE	REFUSED
	HOURS PER	MINUTES PER		
<b>E3.</b> De acuerdo con las directivas nacionales, ¿qué porción de tiempo debe usted estar físicamente activa cada semana para mantenerse saludable? (PROBE FOR CLARITY. RECORD VERBATIM. IF NOT SURE, ASK TO PROVIDE BEST GUESS.)	week____	week____	77 <input type="checkbox"/>	99 <input type="checkbox"/>
<b>E4.</b> De acuerdo con las directivas nacionales, ¿cuánto tiempo debería su (hijo) (niños) estar físicamente activo(s) cada día para mantenerse saludable(s)? (PROBE FOR CLARITY. RECORD VERBATIM IF NOT SURE, ASK TO PROVIDE BEST GUESS.)	day____	day____	77 <input type="checkbox"/>	99 <input type="checkbox"/>

**E5.** En una semana normal ¿hay días en los que usted está físicamente activa durante al menos 10 minutos a la vez? Píense solamente en su tiempo libre, no en su tiempo del trabajo o el trabajo en la casa.

**ASK E6a** YES ..... 1  
 NO ..... 2  
 NO, PHYSICALLY DISABLED (VOL. ONLY) 3  
 DON'T KNOW/NOT SURE ..... 77  
 REFUSED ..... 99

**SKIP TO E7** →

**IF YES, ASK:**

**E6a.** ¿Cuántos días por semana está activo por lo menos de 10 minutos? IF NECESSARY READ: No incluya el tiempo de trabajo o el trabajo en la casa.

**ASK E6b** (RECORD NUMBER):  
 \_\_\_\_\_ DAYS PER WEEK ..... 1

DID NOT DO ANY PHYSICAL ACTIVITY FOR AT LEAST 10 MINUTES AT A TIME ...2

**ASK E6b** DON'T KNOW/NOT SURE ..... 77  
 REFUSED ..... 99

**SKIP TO E7** →

**IF AT LEAST ONE DAY A WEEK OR DK OR REF, ASK:**

**E6b.** En los días en que usted está físicamente activa durante al menos 10 minutos durante su tiempo libre, ¿cuánto tiempo en total por día se dedica usted normalmente a estas actividades?

(RECORD # OF HOURS/MINUTES)  
 \_\_\_\_\_ HOURS PER DAY ..... 1  
 \_\_\_\_\_ MINUTES PER DAY ..... 2  
 DON'T KNOW/NOT SURE ..... 77  
 REFUSED ..... 99

## Physical Activity – Self Efficacy

### Actividad Física – Autoeficacia

**E7.** Voy a leerle una lista de cosas que la gente puede hacer para aumentar o mantener la actividad física regular. Una vez más, por actividad física me refiero a actividades como caminar rápidamente, andar en bicicleta, jardinería o bailar rápido. Si usted es físicamente activa o no, por favor califique qué tan segura está de que puede motivarse a hacer cosas que le voy a mencionar en la mayoría de los días de la semana de trabajo, por lo menos durante seis meses. ¿Qué tan segura está de que usted puede... (READ LIST)? ¿Diría "Sé que puedo", "tal vez yo pueda", o "Yo sé que no puedo?"

(ROTATE LIST)

	I KNOW I CAN	MAYBE I CAN	I KNOW I CANNOT	NOT APPLICABLE (VOL. ONLY)	DON'T KNOW	REFUSED
( ) <b>a.</b> Apartar tiempo para hacer actividad física cuando está pasando por un cambio de vida estresante (por ejemplo, un divorcio, una muerte en la familia o una mudanza).	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
( ) <b>b.</b> Apartar tiempo para hacer actividad física después de un día largo y agotador en el trabajo.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
( ) <b>c.</b> Apartar tiempo para hacer actividad física, es decir, caminar, correr, nadar, andar en bicicleta u otras actividades continuas durante al menos 2 horas y media a la semana.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
( ) <b>d.</b> Apartar tiempo para hacer actividad física aún cuando su familia está exigiendo más de su tiempo.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
( ) <b>e.</b> Apartar tiempo para hacer actividad física aún cuando tiene exceso de demandas en el trabajo.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
( ) <b>f.</b> Apartar tiempo para hacer actividad física cuando tiene que terminar quehaceres.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>

**F1.** Dígame otra vez, incluyéndose usted misma, ¿cuántas personas viven en su hogar?

# OF PEOPLE: \_\_\_\_\_

DON'T KNOW/NOT SURE..... 77

REFUSED ..... 99

**F2.** ¿Cuántos de estos son niños menores de 18 años de edad?

# OF CHILDREN UNDER AGE 18: \_\_\_\_\_

DON'T KNOW/NOT SURE..... 77

REFUSED ..... 99

	NOT AT ALL	LESS THAN EVERY MONTH	EVERY MONTH	EVERY WEEK	EVERY DAY	DON'T KNOW/ NOT SURE	REFUSED	NOT APPLICABLE
<b>F3.</b> ¿Con qué frecuencia hace usted el que sea fácil para (cualquiera de) (su) (hijo) (niños) que vive(n) en su hogar comer frutas y verduras, como por ejemplo tenerlos lavados, cortados y listos para comer? ¿Diría usted que nunca, menos que cada mes, cada mes, cada semana, o cada día?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>	10 <input type="checkbox"/>
<b>F4.</b> ¿Con qué frecuencia hace usted el que sea fácil para (cualquiera de) (su) (hijo) (niños) que vive(n) en su hogar estar físicamente activo(s), como por ejemplo llevarlo(s) a la práctica deportiva, jugar a la pelota con el(los), o animarlos a jugar al aire libre o andar en bicicleta? ¿Diría usted que nunca, menos que cada mes, cada mes, cada semana, o cada día?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>	10 <input type="checkbox"/>
<b>F5.</b> ¿Con qué frecuencia hacen usted y sus niños una actividad física juntos, como jugar a la pelota, andar en bicicleta, o salir a caminar? ¿Diría usted que nunca, menos que cada mes, cada mes, cada semana, o cada día? (GET BEST ANSWER)	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>	10 <input type="checkbox"/>
<b>F6.</b> ¿Con qué frecuencia hace que sea fácil para (cualquiera de) (su) (hijo) (niños) que viven en su casa el beber agua, por ejemplo al tener una jarra llena o botellas de agua disponibles? ¿Diría usted que nunca, menos que cada mes, cada mes, cada semana, o cada día? (GET BEST ANSWER)	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>	10 <input type="checkbox"/>



	YES	NO	DON'T KNOW/ NOT SURE	REFUSED
<b>F7.</b> ¿Usted ha establecido límites para la cantidad de tiempo que su niño (s) mira(n) la televisión cada día?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
<b>F8.</b> ¿Usted ha establecido límites para la cantidad de "alimentos poco saludables" que tiene en el hogar como bocadillos para su hijo(s)? (IF NEEDED, SAY:) Por alimentos poco saludables, me refiero a cosas como papas fritas, dulces y otros bocadillos azucarados.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
<b>F9.</b> ¿Usted ha establecido límites para la cantidad de bebidas azucaradas que tiene en el hogar para los niños? Por bebidas azucaradas, me refiero a refrescos, bebidas deportivas y jugos endulzados con azúcar.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
<b>F10.</b> ¿Ha sustituido las bebidas azucaradas por agua en las comidas o bocadillos para su familia?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>

**G1.** Para las frases siguientes, por favor dígame ¿qué tan segura está de que usted pueda hacer cada una, en una escala del 1 al 5, donde el 1 significa que no está nada segura y el 5 que está muy segura. Si usted cae en algún punto intermedio, elija 2, 3, o 4. ¿Qué tan segura está de que usted podría: (READ LIST). (IF NECESSARY, SAY:) en una escala del 1 a 5 donde 1 es estar nada segura y el 5 está muy segura?

(ROTATE LIST)

	NOT SURE AT ALL				EXTREMELY SURE	DON'T KNOW	REFUSED
( ) <b>b.</b> Comprar frutas y verduras, aún cuando tiene que viajar más lejos para conseguirlos?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
( ) <b>c.</b> ¿Hacer que su familia coma frutas y verduras en las comidas?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
( ) <b>d.</b> ¿Establecer límites en la cantidad de comida chatarra que tiene como bocadillos para sus hijos, como las papitas fritas, dulces y golosinas que tiene en casa?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
( ) <b>e.</b> ¿Establecer límites en la cantidad de refrescos u otras bebidas azucaradas que tiene en casa?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
( ) <b>f.</b> ¿Tener frutas o verduras lavadas, cortadas y listas para que su familia coma como bocadillo?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
( ) <b>n.</b> ¿Decir "no" a sus niños cuando piden dulces por la tarde?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
( ) <b>g.</b> ¿Hacer que su familia coma una cena juntos por lo menos 5 veces a la semana?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
( ) <b>h.</b> ¿Llevar a sus hijos al parque, a la alberca o a otros lugares donde pueden estar físicamente activo(s), aún cuando usted está ocupada con otras responsabilidades?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
( ) <b>i.</b> ¿Animar a sus hijos a andar en bicicleta o jugar al aire libre, aún cuando tengan otras cosas que quieren hacer?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
( ) <b>j.</b> ¿Realizar actividad física con su familia, aún cuando esté cansada después de un largo día en el trabajo?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
( ) <b>k.</b> ¿Establecer límites en la cantidad de tiempo que sus hijos vean la televisión todos los días aunque esto los haga infelices?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
( ) <b>l.</b> ¿Solicitar CalFresh (antes conocido como el programa de Estampillas de Comida) para su familia aunque sea algo que usted nunca haya considerado antes?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>

- G2.** Para las siguientes frases, estamos interesados en lo que usted cree que la gente que usted conoce está haciendo realmente. Para cada una, por favor dígame cuántas personas que usted conoce ... (READ LIST). ¿Diría usted que pocas o ninguna de las personas que conoce, algunas personas que usted conoce, la mayoría o todas las personas que usted conoce? (ROTATE LIST)

	FEW / NONE	SOME	MOST/ALL	DON'T KNOW	REFUSED
( ) a. ¿Comen suficientes frutas y verduras todos los días?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
( ) b. ¿Están físicamente activas por lo menos dos horas y media a la semana?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>

- G3.** Para las siguientes frases, estamos interesados en lo que usted piensa que otras madres que usted conoce están haciendo realmente. Para cada una, por favor dígame cuántas madres usted conoce ... (READ LIST). ¿Diría usted que pocas o ninguna de las madres que conoce, algunas madres que usted conoce, la mayoría o todas las madres que usted conoce? (ROTATE LIST)

	FEW / NONE	SOME	MOST/ALL	DON'T KNOW	REFUSED
( ) a. ¿Facilitan el que sus hijos coman frutas y verduras todos los días?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
( ) b. ¿Facilitan el que sus hijos estén físicamente activos todos los días?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
( ) c. ¿Establecen límites en la cantidad de tiempo que sus hijos vean la televisión cada día?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
( ) d. Establecen límites para la cantidad de "alimentos poco saludables" que tienen en el hogar como bocadillos para los niños? (IF NEEDED, SAY:) Por alimentos poco saludables, me refiero a cosas como papitas fritas, dulces y otros bocadillos y bebidas azucaradas.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
( ) e. Establecen límites en la cantidad de bebidas azucaradas que tienen en el hogar para sus niños, bebidas como refrescos, bebidas deportivas y jugos azucarados.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>

- G4.** Estas frases siguientes se refieren a la actividad física. Por actividad física me refiero a actividades que le causan respirar más fuerte o hacer que su corazón lata más rápido, como caminar rápidamente, jardinería, trabajos pesados en el jardín o bailar rápido. Por favor, dígame ¿qué tan segura está de que usted puede hacer actividad física regular en cada situación, en una escala del 1 al 5, donde el 1 no está nada segura y el 5 está muy segura. Si usted cae en algún punto intermedio, elija 2, 3, o 4. ¿Qué tan segura está de que usted puede hacer actividad física regular: (READ LIST). (SI ES NECESARIO, DIGA:) en una escala del 1 al 5 con el 1 no está nada segura y el 5 está muy segura?

(ROTATE LIST)	NOT SURE AT ALL				EXTREMELY SURE	DON'T KNOW	REFUSED
( ) a. ¿Cuándo usted está cansada?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
( ) b. ¿Cuándo usted está de mal humor?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
( ) c. ¿Cuándo usted no tiene tiempo?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
( ) d. ¿Cuándo usted está de vacaciones?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
( ) e. ¿Cuándo está lloviendo o hace frío?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>

**G5.** Voy a leerle un par de frases acerca de cómo usted puede obtener suficientes frutas y verduras y de hacer actividad física. Para cada una, por favor dígame si usted está de acuerdo o en desacuerdo.  
(**READ LIST:**) ¿Está de acuerdo o en desacuerdo? (**THEN ASK:**) ¿Sería totalmente o algo?? (**ROTATE LIST**)

	STRONGLY AGREE	SOMEWHAT AGREE	NEITHER AGREE NOR DISAGREE (VOL. ONLY)	SOMEWHAT DISAGREE	STRONGLY DISAGREE	DON'T KNOW/ NOT SURE	REFUSED
( ) <b>f.</b> No puedo encontrar buenas frutas y verduras frescas en mi barrio.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
( ) <b>a.</b> No puedo encontrar lugares para estar físicamente activa.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>

**Ahora me gustaría hacerle algunas preguntas acerca de las actividades en las que usted haya tomado parte en los últimos 3 meses.**

	YES	NO	DON'T KNOW/ NOT SURE	REFUSED
<b>H1.</b> En los últimos 3 meses, ¿usted ha participado en una clase, taller u otra actividad de grupo acerca de comer frutas y verduras o estar físicamente activa?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
<b>H2.</b> En los últimos 3 meses, ¿usted ha visto a alguien haciendo una demostración en vivo de alimentos, donde prepararon una receta con frutas o verduras?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
<b>H3.</b> En los últimos 3 meses, ¿(alguno de sus hijos) (su hijo) trajo a casa información acerca de comer frutas y verduras o estar físicamente activa?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
<b>H4.</b> En los últimos 3 meses, ¿usted ha visto alguna otra información escrita recomendando frutas y verduras o actividad física, por ejemplo en letreros, pósters o folletos?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
<b>H5a.</b> En los últimos 3 meses, ¿usted ha asistido a un festival, celebración o feria de salud en su comunidad?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
<b>IF H5A IS YES, ASK:</b>				
<b>H5b.</b> En ese festival, celebración o feria de salud, ¿usted tomó parte en alguna actividad que tenía que ver con comer frutas y verduras o estar físicamente activa?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>

**Las siguientes preguntas son acerca de su trabajo y el tipo de actividades que realiza en el trabajo. Para cada pregunta, por favor considere el trabajo realizado fuera del hogar.**

**I1a.** ¿Su empleador le proporciona algún beneficio relacionado con la nutrición? Me refiero a cosas como clases de nutrición, bocadillos de frutas y verduras, alimentos saludables durante las juntas, alimentos saludables en las máquinas expendedoras, o descuentos en la elección de alimentos saludables en la cafetería del lugar de trabajo?

YES.....1  
 NO.....2 → **SKIP TO I2a**  
 NOT APPLICABLE, NOT EMPLOYED.....7 → **SKIP TO J1**  
 DON'T KNOW/NOT SURE.....77 → **SKIP TO I2a**  
 REFUSED .....99 → **SKIP TO I2a**

**IF YES, ASK:**

**I1b.** En los últimos 12 meses, ¿usted ha utilizado alguno de estos beneficios relacionados con la nutrición?

YES.....1  
 NO.....2  
 DON'T KNOW/NOT SURE.....77  
 REFUSED .....99

**I2a.** ¿Su empleador le proporciona algún beneficio de acondicionamiento físico? Me refiero a cosas como clases de ejercicio, tiempo libre para actividad física, clubes de caminatas, promociones de escalera, o descuentos en membresías de gimnasios?

YES.....1  
 NO.....2 → **SKIP TO J1**  
 NOT APPLICABLE, NOT EMPLOYED.....7 → **SKIP TO J1**  
 DON'T KNOW/NOT SURE.....77 → **SKIP TO J1**  
 REFUSED .....99 → **SKIP TO J1**

**IF YES, ASK:**

**I2b.** En los últimos 12 meses, ¿usted ha utilizado alguno de estos beneficios de acondicionamiento físico?

YES.....1  
 NO.....2  
 DON'T KNOW/NOT SURE.....77  
 REFUSED .....99

**J1a. ¿Cuántos años tiene usted?**

RECORD AGE: \_\_\_\_\_ → **SKIP TO J2**

DON'T KNOW .....	77
REFUSED .....	99

} **GO TO J1B**

**IF REFUSED OR DON'T KNOW, ASK:**

**J1b. No necesitamos saber exactamente su edad, pero en general ¿está entre las edades de.....? (READ CATEGORIES)?**

18–24 .....	1
25–29 .....	2
30–39 .....	3
40–49 .....	4
50–55 .....	5
DO NOT READ → REFUSED .....	99

**J2. ¿Cuál es el último año de escuela que ha terminado o por el cual ha recibido crédito? (Si 4 años de universidad, pregunte :) ¿Usted se graduó y recibió un título universitario?**

LESS THAN HIGH SCHOOL .....	1
HIGH SCHOOL GRADUATE/GED .....	2
SOME COLLEGE .....	3
COLLEGE GRADUATE (BA/BS/MASTER'S/PH.D.) .....	4
DON'T KNOW .....	77
REFUSED .....	99

**J3b. Qué idioma (s) suele usted hablar en casa? (READ LIST) (SELECT ONE ANSWER)**

<div>DO NOT READ</div>	INGLÉS SOLAMENTE .....	1
	MÁS INGLÉS QUE ESPAÑOL.....	2
	AMBOS IGUALMENTE .....	3
	MÁS ESPAÑOL QUE INGLÉS.....	4
	SOLAMENTE ESPAÑOL .....	5
	{ DON'T KNOW .....	77
	{ REFUSED .....	99

**J4. ¿Tiene usted acceso a la Internet, ya sea en casa o en otro lugar, al menos una vez a la semana?**

YES.....	1
NO.....	2
DON'T KNOW/NOT SURE.....	77
REFUSED .....	99

**J5. ¿Usted utiliza un teléfono inteligente para el correo electrónico y la Web?**

YES.....	1
NO.....	2
DON'T KNOW/NOT SURE.....	77
REFUSED .....	99

**J6. ¿Alguna vez usted ha creado su propio perfil en línea para que los demás lo puedan ver, como lo sería en un sitio de redes sociales como MySpace, Facebook o LinkedIn.com?**

YES .....	1
NO .....	2
DON'T KNOW/NOT SURE .....	77
REFUSED .....	99

→ SKIP TO J9

IF J6 = YES, ASK:

**J7a. ¿En qué sitio de redes sociales (s) está su perfil? (READ LIST AND ASK IF THERE ARE ANY OTHERS THEY USE) (ANSWER MAY BE A MULTIPLE)**

<div>DO NOT READ</div>	FACEBOOK.....	1
	MYSpace .....	2
	TWITTER.....	3
	YAHOO .....	4
	YOUTUBE .....	5
	OTRO (ESPECIFIQUE ) .....	6
	OTRO (ESPECIFIQUE ) .....	7
	{ DON'T KNOW/NOT SURE.....	77
	{ REFUSED .....	99

**J7b.** Con qué frecuencia visita usted el sitio donde tiene su perfil? (IF THEY HAVE A PROFILE ON MULTIPLE SITES, ASK THEM TO ANSWER IN TERMS OF SITE THEY VISIT MOST OFTEN (READ LIST).

VARIAS VECES POR DÍA.....	1
CASI UNA VEZ POR DÍA.....	2
CADA DOS DÍAS.....	3
UNA VEZ POR SEMANA.....	4
MENOS FRECUENTEMENTE.....	5
DON'T KNOW/NOT SURE.....	77
REFUSED.....	99

**DO  
NOT  
READ**

**J8.** ¿Qué usa generalmente para obtener acceso a su perfil de su red social? (READ LIST) (SELECT ONE ANSWER)

COMPUTADORA EN CASA.....	1
COMPUTADORA DE LA ESCUELA.....	2
COMPUTADORA DEL TRABAJO.....	3
COMPUTADORA DE LA BIBLIOTECA.....	4
TELÉFONO CELULAR O DISPOSITIVO MÓVIL.....	5
OTRO (ESPECIFIQUE ).....	6
DON'T KNOW/NOT SURE.....	77
REFUSED.....	99

**DO  
NOT  
READ**

**J9.** Usted se considera estar con sobrepeso, baja de peso o de peso promedio (normal?) para su estatura?

OVERWEIGHT.....	1
UNDERWEIGHT.....	2
ABOUT AVERAGE.....	3
DON'T KNOW/NOT SURE.....	77
REFUSED.....	99

**J13.** Aproximadamente, ¿cuánto pesa usted sin zapatos?  
(ENTER WEIGHT IN WHOLE POUNDS or KILOGRAMS ; ROUND FRACTIONS UP, VERIFY IF:  
LESS THAN 80 OR MORE THAN 350 POUNDS  
LESS THAN 36 KILOGRAMS OR MORE THAN 159 KILOGRAMS)

\_\_\_\_\_ POUNDS

\_\_\_\_\_ KILOGRAMS

DON'T KNOW/NOT SURE.....	77
REFUSED.....	99



**J14.** ¿Aproximadamente cuánto mide usted sin zapatos?  
 (ENTER HEIGHT IN FEET AND INCHES OR CENTIMETERS; EXAMPLE: 5 FEET 11 INCHES = 511) (ROUND FRACTIONS DOWN)  
 (VERIFY IF LESS THAN 408 OR GREATER THAN 608 FEET/INCHES OR LESS THAN 142 OR GREATER THAN 203 CENTIMETERS)

\_\_\_\_\_ FEET/INCHES

\_\_\_\_\_ CENTIMETERS

DON'T KNOW/NOT SURE ..... 77

REFUSED ..... 99

	YES	NO	DON'T KNOW/NOT SURE	REFUSED
a. ¿Le han dicho alguna vez que usted padece de diabetes tipo 2?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
b. ¿Alguna vez le han dicho a algún miembro de su familia inmediata que padece de diabetes tipo 2? (IF NECESSARY: Por familia inmediata me refiero a usted, su esposo / pareja, sus padres, su esposo / padres de su pareja, y sus hijos.)	1 <input type="checkbox"/>	2 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
c. ¿Alguna vez le han dicho a usted que tiene una enfermedad del corazón?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
d. ¿Alguna vez le han dicho a algún miembro de su familia inmediata que tiene una enfermedad del corazón?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
e. ¿Alguna vez le han dicho que usted tiene la presión arterial alta?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>
f. ¿Alguna vez le han dicho a algún miembro de su familia inmediata que tiene la presión arterial alta?	1 <input type="checkbox"/>	2 <input type="checkbox"/>	77 <input type="checkbox"/>	99 <input type="checkbox"/>

**J15.** ¿Cuál es su Código Postal actual?

--	--	--	--	--

DON'T KNOW ..... 77

REFUSED ..... 99

**J16.** ¿Alguno de sus hijos en edad escolar recibe comidas gratis o a precio reducido para comidas escolares?

YES ..... 1

NO ..... 2

NO, CHILDREN ARE NOT IN SCHOOL ..... 3

DON'T KNOW/NOT SURE ..... 77

REFUSED ..... 99

**J17.** ¿Usted tiene niños de 5 años de edad o menos?

YES.....1  
NO.....2  
DON'T KNOW/NOT SURE.....77  
REFUSED .....99

IF J17 = YES, ASK:

**J18.** ¿Usted ha utilizado el programa WIC en los últimos 12 meses? (IF NECESSARY, SAY: WIC es un programa de nutrición suplementaria para mujeres, bebés y niños).

YES.....1  
NO.....2  
DON'T KNOW/NOT SURE.....77  
REFUSED .....99

Esas son todas mis preguntas. Muchas gracias por su ayuda en esta importante encuesta.

## Verificación de la Información (Pregunte a la Entrevistada)

MALL ID: \_\_\_\_\_

**V1.** [V1] ¿Podría usted decirme cuál es su número de teléfono? Un supervisor la llamará en los próximos días para comprobar que usted participó en esta entrevista y que recibió \$15. Aparte de eso, nadie más se comunicará con usted.

[a] a. ¿Número de teléfono? CASA (\_\_\_\_\_) \_\_\_\_\_  
(NO PAGERS) CÓDIGO DE ÁREA

TELÉFONO CELULAR (\_\_\_\_\_) \_\_\_\_\_  
CÓDIGO DE ÁREA

[b] b. ¿Su nombre por favor? \_\_\_\_\_  
(NOMBRE DE LA ENTREVISTADA) NOMBRE APELLIDO

[c] c. ¿La ciudad y el estado dónde vive usted? \_\_\_\_\_  
CIUDAD ESTADO

[d] d. Firma de la entrevistada: \_\_\_\_\_  
(FIRMA DE LA ENTREVISTADA)

[e] e. Esas son todas mis preguntas. Muchas gracias..

REVIEW SCREENER AND QUESTIONNAIRE FOR COMPLETENESS ..... ☐

GIVE RESPONDENT \$15 COOPERATION FEE AND ASK RESPONDENT TO SIGN RECEIPT ..... ☐

**V2.** [V2] RECORD DATE OF INTERVIEW: DATE \_\_\_\_\_

**V3.** [V3] ATTACH SCREENER TO **BACK** OF QUESTIONNAIRE ..... ☐

**V4.** [V4] INTERVIEWER ID # \_\_\_\_\_

**V5.** [V5] I hereby certify that the information contained in this questionnaire is a true and accurate record of this respondent's comments as they were given to me.

\_\_\_\_\_  
INTERVIEWER SIGNATURE DATE

**V6.** [V7] \_\_\_\_\_  
SUPERVISOR SIGNATURE DATE